2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25936

FILED Apr 13, 2009 Secretary of State

Entity Name: SAND LAKE POINT HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: C/O ATTWOOD-PHILLIPS INC 385 DOUGLAS AVE 1350 ORANGE AVE STE 100 STE 3000 WINTER PARK, FL 327894932 ALTAMONTE SPRINGS, FL 32714 **Current Mailing Address:** New Mailing Address: C/O ATTWOOD-PHILLIPS INC 385 DOUGLAS AVE 1350 ORANGE AVE STE 100 STE 3000 WINTER PARK, FL 327894932 ALTAMONTE SPRINGS, FL 32714 FEI Number: 59-2912745 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WEAN & MALCHOW PA WEAN & MALCHOW PA 646 EAST COLONIAL AVE 646 EAST COLONIAL DR ORLANDO, FL 32803 ORLANDO, FL 32803 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: 04/13/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition BIACKERT, GAYLE BLACKERT, GAYLE Name: Name: 7022 SANDSTONE DRIVE Address: 7622 SANDSTONE DRIVE Address: City-St-Zip: ORLANDO, FL 32836 City-St-Zip: ORLANDO, FL 32836 Title: () Delete Title: () Change () Addition GEORGANNA, JOE Name: Name: Address: 10020 BRANDON CIRCLE Address: City-St-Zip: ORLANDO, FL 32836 City-St-Zip: Title: () Delete Title: () Change () Addition SCHMIDT, LAWRENCE Name: Name: Address: 10134 POINTVIEW COURT Address: City-St-Zip: ORLANDO, FL 32836 City-St-Zip: Title: DT () Delete Title: () Change () Addition Name: HAY, TIMOTHY G Name: 7633 POINTVIEW CIRCLE Address: Address: City-St-Zip: ORLANDO, FL 32836 City-St-Zip: Title: Title: () Delete () Change () Addition PARTON, WILLIAM Name: Name: 7740 POINTVIEW COURT Address: Address: City-St-Zip: ORLANDO, FL 32836 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GAYLE BLACKERT DP 04/13/2009