## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25936

**Current Mailing Address:** 

ALTAMONTE SPRINGS, FL 32714

FILED Feb 23, 2010 Secretary of State

Entity Name: SAND LAKE POINT HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

385 DOUGLAS AVE 1750 W. BROADWAY STREET

STE 3000 SUITE 220
ALTAMONTE SPRINGS, FL 32714 OVIEDO, FL 32765

WINDIALE OF KINGO, LE 02/14

385 DOUGLAS AVE 1750 W. BROADWAY STREET STE 3000 SUITE 220

OVIEDO, FL 32765

**New Mailing Address:** 

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:

COMMUNITY MANAGEMENT SPECIALISTS, INC 1750 W BROADWAY ST STE 220 OVIEDO, FL 32765 US

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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: VP

Name: BLACKERT, GAYLE
Address: 7622 SANDSTONE DRIVE
City-St-Zip: ORLANDO, FL 32836

Title: F

Name: GEORGANNA, JOE
Address: 10020 BRANDON CIRCLE
City-St-Zip: ORLANDO, FL 32836

Title: S

Name: SCHMIDT, LAWRENCE
Address: 10134 POINTVIEW COURT
City-St-Zip: ORLANDO, FL 32836

Title: T

Name: HAY, TIMOTHY G
Address: 7633 POINTVIEW CIRCLE
City-St-Zip: ORLANDO, FL 32836

Title: D

 Name:
 PARTON, WILLIAM

 Address:
 7740 POINTVIEW COURT

 City-St-Zip:
 ORLANDO, FL 32836

I hereby 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 all other like empowered.

SIGNATURE: JOE GEORGANNA P 02/23/2010