

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25936

FILED
Feb 25, 2011
Secretary of State

Entity Name: SAND LAKE POINT HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1750 W. BROADWAY STREET
SUITE 220
OVIEDO, FL 32765

New Principal Place of Business:

1750 W. BROADWAY STREET
SUITE 222
OVIEDO, FL 32765

Current Mailing Address:

1750 W. BROADWAY STREET
SUITE 220
OVIEDO, FL 32765

New Mailing Address:

1750 W. BROADWAY STREET
SUITE 222
OVIEDO, FL 32765

FEI Number: 59-2912745

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

COMMUNITY MANAGEMENT SPECIALISTS, INC
1750 W BROADWAY ST STE 222
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: KEVIN DAVIS

02/25/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP
Name: BLACKERT, GAYLE
Address: P.O. BOX 620368
City-St-Zip: OVIEDO, FL 32762

Title: P
Name: GEORGANNA, JOE
Address: P.O. BOX 620368
City-St-Zip: OVIEDO, FL 32762

Title: S
Name: SCHMIDT, LAWRENCE
Address: P.O. BOX 620368
City-St-Zip: OVIEDO, FL 32762

Title: T
Name: HAY, TIMOTHY G
Address: P.O. BOX 620368
City-St-Zip: OVIEDO, FL 32762

Title: D
Name: PARTON, WILLIAM
Address: P.O. BOX 620368
City-St-Zip: OVIEDO, FL 32762

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: KEVIN DAVIS

P

02/25/2011

Electronic Signature of Signing Officer or Director

Date