2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35775

FILED Jan 07, 2009 Secretary of State

Entity Name: SANDY COVE TOWNHOMES CONDOMINIUM ASSOCIATION, INC.

| Current Principal Place of Business: | | New Principal Place | New Principal Place of Business: | |
|---|---|---|---|--|
| | ERSEAS HWY ADA, FL 33036 US | | | |
| Current Mailing Address: | | New Mailing Addres | New Mailing Address: | |
| 2771 N E : | 9TH CT | | | |
| POMPAN | O BEACH, FL 33062 US | | | |
| El Number | :: 65-0165967 FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and | d Address of Current Registered Agent: | Name and Address | of New Registered Agent: | |
| ANDREW 2771 N E : POMPAN | , SCOTT 9TH CT O BEACH, FL 33062 US | | | |
| | e named entity submits this statement for th e of Florida. | e purpose of changing its registere | ed office or registered agent, or both, | |
| SIGNATU | RE: | | | |
| | Electronic Signature of Registered A | ∖gent | Date | |
| OFFICERS AND DIRECTORS: | | ADDITIONS/CHANG | ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR | |
| Fitle: Name: Address: City-St-Zip: | P () Delete DUNSON, LES P O BOX 589 WINTER HAVEN, FL 33882 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Fitle: Name: Address: City-St-Zip: | S () Delete BELT, SUSAN 1 FINANCIAL PLAZA #201 FORT LAUDERDALE, FL 33394 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Γitle: | V/D () Delete ANDREW, SCOTT 2771 NE 9 CT | Title: Name: Address: | () Change () Addition | |
| Name: Address: City-St-Zip: | POMPANO BEACH, FL 33062 | City-St-Zip: | | |
| Address: | | City-St-Zip: Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Address: Dity-St-Zip: Fitle: Name: Address: | POMPANO BEACH, FL 33062 D () Delete WILSON, PEGGY 230 MARTINS LANE | Title: Name: Address: | () Change () Addition () Change () Addition | |

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: SCOTT ANDREW V/D 01/07/2009