2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2005
Secretary of State

DOCUMENT# N43090

Entity Name: SANDS PROJECT HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

31171 AVENUE H
BIG PINE KEY, FL 33043 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 430391
BIG PINE KEY, FL 33043 US

New Mailing Address:

FEI Number: 65-0349150 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PANDOL, CHARMAINE
31171 AVENUE H
BIG PINE KEY, FL 33043 US

Name and Address of New Registered Agent:

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: DVP ( ) Delete
Name: ENSMINGER, JAMES
Address: 31130 AVE I
City-St-Zip: BIG PINE KEY, FL 33043

Title: DS ( ) Delete
Name: HASKINS, ANNA M
Address: 31147 AVE H
City-St-Zip: BIG PINE KEY, FL 33043

Title: DT ( ) Delete
Name: VERELINE, CATHERINE
Address: 31142 AVE I
City-St-Zip: BIG PINE KEY, FL 33043

Title: DP ( ) Delete
Name: PANDOL, CHARMAINE
Address: 31171 AVENUE H
City-St-Zip: BIG PINE KEY, FL 33043

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHARMAINE PANDOL DP 03/05/2005

Electronic Signature of Signing Officer or Director — Date