

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 03, 2006
Secretary of State**

DOCUMENT# N93000001810

Entity Name: SANDPIPER COVE CONDOMINIUM HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1745 GULF BLVD.
#16
ENGLEWOOD, FL 34223 US

New Principal Place of Business:

Current Mailing Address:

1745 GULF BLVD.
#16
ENGLEWOOD, FL 34223 US

New Mailing Address:

FEI Number: 65-0417087 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

POTTS, JANET E
1745 GULF BLVD
UNIT #11
ENGLEWOOD, FL 34223 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: D () Delete
Name: FRENCH, H. WELLS
Address: 1745 GULF BLVD., #6
City-St-Zip: ENGLEWOOD, FL 34223

Title: PD () Delete
Name: MATTHEWS, JOAN
Address: 1745 GULF BLVD #14
City-St-Zip: ENGLEWOOD, FL 34223

Title: STD () Delete
Name: POTTS, JANET E
Address: 1745 GULF BLVD.#16
City-St-Zip: ENGLEWOOD, FL 34223

Title: VD () Delete
Name: KARPOWICH, JOSEPH
Address: 1745 GULF BLVD #9
City-St-Zip: ENGLEWOOD, FL 34223

Title: D () Delete
Name: DAVIESON, HENRY R
Address: 1745 GULF BLVD., #10
City-St-Zip: ENGLEWOOD, FL 34223

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: EMSHOUSEN, FRED
Address: 1745 GULF BLVD., #8
City-St-Zip: ENGLEWOOD, FL 34223

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 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: JANET E POTTS

STD

05/03/2006

Electronic Signature of Signing Officer or Director

Date