

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005057

FILED
May 30, 2009
Secretary of State

Entity Name: SANDCASTLE STORYTELLERS, INC.

Current Principal Place of Business:

210 WEST FERN DRIVE
ORANGE CITY, FL 32762

New Principal Place of Business:

210 WEST FERN DRIVE
ORANGE CITY, FL 32763 US

Current Mailing Address:

210 WEST FERN DRIVE
ORANGE CITY, FL 32763 US

New Mailing Address:

210 W. FERN DR.
ORANGE CITY, FL 32763 US

FEI Number: 59-3366344 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:

MENTER, JEANNE
210 WEST FERN DRIVE
ORANGE CITY, FL 32762 US

Name and Address of New Registered Agent:

MENTER, JEANNE
210 WEST FERN DRIVE
ORANGE CITY, FL 32763 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: JEANNE A. MENTER

05/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: GIACHETTI, PETER
Address: P OBOX 184
City-St-Zip: LAKE HELEN, FL 32744

Title: TD () Delete
Name: MENTER, JEANNE
Address: 210 W FERN DR
City-St-Zip: ORANGE CITY, FL 32763

Title: SD () Delete
Name: DEER, TERRY
Address: 1032 TOMPKINS DR
City-St-Zip: PORT ORANGE, FL 32119

Title: P () Delete
Name: GANT, RAYMOND
Address: 309 WHITE PL
City-St-Zip: PORT ORANGE, FL 32127

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: GIACHETTI, PETER
Address: P OBOX 184
City-St-Zip: LAKE HELEN, FL 32744 US

Title: TD (X) Change () Addition
Name: MENTER, JEANNE
Address: 210 W FERN DR
City-St-Zip: ORANGE CITY, FL 32763 US

Title: PRES (X) Change () Addition
Name: GIANCHETTI, SHERRIL
Address: P.O. BOX 184
City-St-Zip: LAKE HELEN, FL 32744 US

Title: SECY (X) Change () Addition
Name: DEER, TERRY
Address: 2239 RIVER RIDGE DR.
City-St-Zip: DELAND, FL 32701 US

Title: HIST () Change (X) Addition
Name: GANT, RAY
Address: 309 WHITE PL.
City-St-Zip: PORT ORANGE, FL 32127 US

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: JEANNE A. MENTER

TD

05/30/2009

Electronic Signature of Signing Officer or Director

Date