

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004619

FILED
Mar 06, 2009
Secretary of State

Entity Name: SANDHILL LANE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

3601 CYPRESS GARDENS RD, STE A
WINTER HAVEN, FL 33884

New Principal Place of Business:

3601 CYPRESS GARDENS RD
SUITE A
WINTER HAVEN, FL 33884

Current Mailing Address:

3601 CYPRESS GARDENS RD, STE A
WINTER HAVEN, FL 33884

New Mailing Address:

3601 CYPRESS GARDENS RD
SUITE A
WINTER HAVEN, FL 33884

FEI Number: 59-3626026

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOOD, JOHN G JR
3601 CYPRESS GARDENS RD, STE A
WINTER HAVEN, FL 33884 US

Name and Address of New Registered Agent:

WOOD, JOHN G JR
3601 CYPRESS GARDENS RD
SUITE A
WINTER HAVEN, FL 33884 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:

03/06/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DIEROLF, GERRY
Address: 1813 SANDHILL LN
City-St-Zip: WINTER HAVEN, FL 33884

Title: D () Delete
Name: CRENSHAW, CARL
Address: 1807 SANDHILL LN
City-St-Zip: WINTER HAVEN, FL 33884

Title: PD () Delete
Name: GUILMETTE, DON
Address: 1814 SANDHILL LANE
City-St-Zip: WINTER HAVEN, FL 33884

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:

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: ANNE V WOOD

CONT

03/06/2009

Electronic Signature of Signing Officer or Director

Date