

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007340

FILED
Apr 25, 2008
Secretary of State

Entity Name: SANDLAKE COURTYARDS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044

New Mailing Address:

FEI Number: 65-0965707

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR
SENTRY MANAGEMENT INC
2180 W. SR 434, STE. 5000
LONGWOOD, FL 327795044 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: PD () Delete
Name: WRIGHT, GREG
Address: 4401 VINELAND RD STE A16-17
City-St-Zip: ORLANDO, FL 32811

Title: VPD () Delete
Name: IODICE, SAL
Address: 4401 VINELAND RD STE A16-17
City-St-Zip: ORLANDO, FL 32811

Title: STD () Delete
Name: HAYWOOD, ROBERT
Address: 7900 S ORANGE BLOSSOM TRL
City-St-Zip: ORLANDO, FL 32809

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LENT, THOMAS
Address: 105 WAYSIDE CT
City-St-Zip: SANFORD, FL 32771

Title: VPD (X) Change () Addition
Name: JUARBE, MARTIN
Address: 4722 MURRAY HILL DR
City-St-Zip: TAMPA, FL 33615

Title: TD (X) Change () Addition
Name: YONG, HUANG
Address: 15507 PEBBLE RIDGE ST
City-St-Zip: WINTER GARDEN, FL 34787

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: THOMAS LENT

PD

04/25/2008

Electronic Signature of Signing Officer or Director

Date