2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000116006

1. Entity Name
SAND DOLLAR INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
8283 VICO COURT SARASOTA, FL 34240 US	8283 VICO COURT SARASOTA, FL 34240 US

03152006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-1467289 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. **Name and Address of Current Registered Agent**

MILLER, JOHN STD
8283 VICO COURT
SARASOTA, FL 34240

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ______________________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

H00000471637
03/29/06-00005-006 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	GRINER, DOUG
STREET ADDRESS	6515 CASE AVE.
CITY-ST-ZIP	BRADENTON, FL 34207
TITLE	VD
NAME	MARTIN, TIM
STREET ADDRESS	230 E WINDSOR RD
CITY-ST-ZIP	HINSDALE, MA 01235
TITLE	VD
NAME	DUPEE, WILLIAM
STREET ADDRESS	32 GREYLOCK AVE
CITY-ST-ZIP	ADAMS, MA 01220
TITLE	STD
NAME	MILLER, JOHN
STREET ADDRESS	1279 CORNISH CT
CITY-ST-ZIP	SARASOTA, FL 34232
TITLE	D
NAME	GALLAGHER, DALE
STREET ADDRESS	6709A 45TH AVE W
CITY-ST-ZIP	BRADENTON, FL 34210
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ______________________________
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #