## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000057567

Entity Name: SANDY'S COOKIELAND, INC.

FILED Sep 04, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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16875 TYRONE SQUARE 6993 TYRONE SQUARE

SUITE 704 SUITE 704

ST. PETERSBURG, FL 33710 US ST. PETERSBURG, FL 33710 US

**Current Mailing Address:** New Mailing Address:

16875 TYRONE SQUARE 6993 TYRONE SQUARE

SUITE 704 SUITE 704

ST. PETERSBURG, FL 33710 US ST. PETERSBURG, FL 33710 US

FEI Number: 20-4759250 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HAGEN, MICHAEL 6385 PRESIDENTIAL COURT #108 FORT MYERS, FL 33919 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P//P ( ) Delete Title: (X) Change ( ) Addition

Name: RICE, SANDRA L Name: RICE, SANDRA L

16875 TYRONE SQUARE SUITE 704 6993 TYRONE SQUARE SUITE 704 Address: Address: City-St-Zip: ST. PETERSBURG, FL 33710 City-St-Zip: ST. PETERSBURG, FL 33710

Title: Title: S/T () Delete (X) Change ( ) Addition

Name: RICE, SANDRA L Name: RICE, SANDRA L

16875 TYRONE SQUARE SUITE 704 6993 TYRONE SQUARE SUITE 704 Address: Address: ST. PETERSBURG, FL 33710 ST. PETERSBURG, FL 33710 City-St-Zip: City-St-Zip:

Title: Title: (X) Change ( ) Addition D ( ) Delete D

RICE, SANDRA L RICE, SANDRA L Name: Name:

16875 TYRONE SQUARE SUITE 704 6993 TYRONE SQUARE SUITE 704 Address: Address: City-St-Zip: ST. PETERSBURG, FL 33710 City-St-Zip: ST. PETERSBURG, FL 33710

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SANDRA RICE **PRES** 09/04/2007