## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000100318

BOSCO, ALBERT J

PALM BAY, FL 32909

3391 BAYSIDE LAKES BLVD

Name:

Address:

City-St-Zip:

Entity Name: SANDY PINES DEVELOPMENT CORPORATION

FILED Apr 29, 2005 Secretary of State

•						
Current Principal Place of Business:			New Prince	New Principal Place of Business:		
3391 BAYSIDE LAKES BLVD PALM BAY, FL 32908				3391 BAYSIDE LAKES BLVD PALM BAY, FL 32909		
Current M	lailing Addres	s:	New Maili	New Mailing Address:		
3391 BAYSIDE LAKES BLVD PALM BAY, FL 32908				3391 BAYSIDE LAKES BLVD PALM BAY, FL 32909		
FEI Number	: 59-3423148	FEI Number Applied For ( )	FEI Number Not App	icable ( ) Certificate of Status Desir	red ( )	
Name and	l Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:		
	D ETTO AVENUI RNE, FL 32901		3391 BAYS	JEFFERIES, BENJAMIN E 3391 BAYSIDE LAKES BLVD. PALM BAY, FL 32909 US		
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing i	ts registered office or registered agent	t, or both,	
SIGNATUR	RE: BENJAMI	N E. JEFFERIES		04/29/2005		
	Electron	ic Signature of Registered Age	ent	Date		
Election Car	mpaign Financing	g Trust Fund Contribution ( ).				
OFFICER	S AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	JEFFERIES, BE 3391 BAYSIDE	LAKES BLVD	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	STD () ENGLE, C. DOU 712 PALMETTO MELBOURNE, I	AVE	Title: Name: Address: City-St-Zip:	STD (X) Change ( ) Addition ENGLE, C. DOUGLAS 504 N. HARBOR CITY BLVD. MELBOURNE, FL 32935		
Title: Name: Address: City-St-Zip:	THOMPSON, R 3391 BAYSIDE	LAKES BLVD	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title:	VD ()	Delete	Title:	( ) Change ( ) Addition		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Name:

Address:

City-St-Zip:

SIGNATURE: BENJAMIN E. JEFFERIES P 04/29/2005