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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Jan 20 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S65786

(3)

SANDPIPER KEY DEVELOPMENT COMPANY, INC. Principal Place of Business Mailing Address 3579 ACCESS ROAD 3579 ACCESS ROAD **ENGLEWOOD FL 34224** SUITE L DO NOT WRITE IN THIS SPACE ENGLEWOOD FL 34224 3. Date Incorporated or Qualified 07/12/1991 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 65-0280471 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Suite Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 7 Yes Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GUNDERSON, MIKO P. 1861 PLACIDA ROAD Street Address (P.O. Box Number is Not Acceptable) 82 SUITE 104 83 **ENGLEWOOD FL 34223** Zip Code 84 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE. (NOTL: Registered Agent signature required when reinstalling) Signature, typed or printed name of registered agent and title if applicable DATE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. DELETE ☐ Change Addition 1.1 TITLE TITLE **NEWELL, DARRYL** 1.2 NAME NAME 3579 ACCESS RD. 1.3 STREET ADDRESS STREET ADDRESS **ENGLEWOOD FL** 1.4 CHY-\$1-7IP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE DIGNAM, THOMAS M. 2.2 NAME NAME 1201 S. MCCALL RD. STREET ADDRESS 2.3 STREET ADDRESS **ENGLEWOOD FL** CITY-ST-ZIF 2 4 CITY-ST-ZIP DELETE ☐ Change ___ Addition TITLE 31 TITLE NAME 32 NAME STREET ADDRESS **3.3 STREET ADDRESS** CITY-ST-ZIP 3.4. City-St-ZiP DELETE Change Addition 4.1 DELF TITLE 4.2 NAME NAME 4.3 STREET AUDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 51 TITLE TITLE 5 2 NAME NAME STREET ADDRESS **5 3 STREET ADDRESS** CITY+ST-ZIP 5.4 OffY-ST-ZIP DELETE Change Addition TITLE 61 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental arrival 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or on an attachment with an address.

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