

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 737942

**Entity Name:** SANDS POINT CONDOMINIUM ASSOCIATION OF LONGBOAT KEY, INC.**FILED**  
**Jan 24, 2023**  
**Secretary of State**  
**7196683184CC****Current Principal Place of Business:**100 SANDS POINT RD  
LONGBOAT KEY, FL 34228**Current Mailing Address:**100 SANDS POINT RD  
OFFICE  
LONGBOAT KEY, FL 34228 US**FEI Number: 59-1735267****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**SANDS POINT CONDOMINIUM ASSOCIATION OF LONGBOAT KEY, INC.  
100 SANDS PT RD  
UNIT OFFICE  
LONGBOAT KEY, FL 34228 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: PETER FRYZEL****01/24/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           STARR, JAMES  
Address        100 SANDS POINT RD  
                  UNIT 113  
City-State-Zip: LONGBOAT KEY FL 34228

Title           PRESIDENT  
Name           FRYZEL, PETER  
Address        100 SANDS POINT RD  
                  #312  
City-State-Zip: LONGBOAT KEY FL 34228

Title           DIRECTOR  
Name           WATSON-JOHNSON, JOAN  
Address        100 SANDS POINT RD  
                  116  
City-State-Zip: LONGBOAT KEY FL 34228

Title           DIRECTOR  
Name           DUBBS, THOMAS  
Address        100 SANDS POINT RD  
                  123  
City-State-Zip: LONGBOAT KEY FL 34228

Title           SECRETARY  
Name           WARE, LINDA  
Address        100 SANDS POINT ROAD  
                  316  
City-State-Zip: LONGBOAT KEY FL 34228

Title           DIRECTOR  
Name           MULLER, THOMAS  
Address        100 SANDS POINT ROAD  
                  115  
City-State-Zip: LONGBOAT KEY FL 34228

Title           VP  
Name           MULLER, GEORGE  
Address        100 SANDS POINT ROAD  
                  105  
City-State-Zip: LONGBOAT KEY FL 34228

*I hereby 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 all other like empowered.*

**SIGNATURE: PETER FRYZEL****PRESIDENT****01/24/2023**

Electronic Signature of Signing Officer/Director Detail

Date