

**2013 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# 745754

**Entity Name:** SANDTREE HOME OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

ACCT. DEPT INC  
185 E INDIANTOWN RD., SUITE 127  
JUPITER, FL 33477

**Current Mailing Address:**

ACCT. DEPT INC  
185 E INDIANTOWN RD., SUITE 127  
JUPITER, FL 33477 US

**FEI Number: 59-2044022**

**Certificate of Status Desired: No**

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

ACCOUNTING DEPARTMENT, INC  
185 E INDIANTOWN RD., SUITE 127  
JUPITER, FL 33477 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

**Officer/Director Detail :**

Title            T/S  
Name            ROBINSON, CHERYL  
Address        510 SANDTREE DRIVE  
City-State-Zip: PALM BEACH GARDENS FL 33403

Title            VP  
Name            CONNELLY, SCOTT  
Address        502 SANDTREE DRIVE  
City-State-Zip: PALM BEACH GARDENS FL 33403

*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: CHERYL ROBINSON**

**T/S**

**06/04/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date