

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007489

Entity Name: SAND CLIFFS ON THE GULF HOMEOWNERS' ASSOCIATION, INC.**FILED**
Feb 01, 2024
Secretary of State
8474375201CC**Current Principal Place of Business:**9064 E COUNTY HWY 30-A
INLET BEACH, FL 32461**Current Mailing Address:**9064 E COUNTY HWY 30-A
SAND CLIFFS CONDOMINIUMS
INLET BEACH, FL 32461 US**FEI Number: 20-1521228****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**DUNLAP AND SHIPMAN, PA
2063 SOUTH COUNTY HIGHWAY 395
SANTA ROSA BEACH, FL 32459 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:** GARY SHIPMAN**02/01/2024**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	SECRETARY
Name	HAEFNER, DAN
Address	154 COLD CREEK DRIVE
City-State-Zip:	ALPHARETTA GA 30009

Title	PRESIDENT
Name	HODGES, BILL
Address	132 SAND CLIFFS DRIVE
City-State-Zip:	INLET BEACH FL 32461

Title	BOARD MEMBER
Name	BELL, RYAN
Address	2441 US HWY 98 W SUITE 109
City-State-Zip:	SANTA ROSA BEACH FL 32459

Title	TREASURER
Name	LAUDERDALE, MATTHEW
Address	2441 US HWY 98 W SUITE 109
City-State-Zip:	SANTA ROSA BEACH FL 32459

Title	VP
Name	NASH, J. ALLAN
Address	2441 US HWY 98 W SUITE 109
City-State-Zip:	SANTA ROSA BEACH FL 32459

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: BILL HODGES**PRESIDENT****02/01/2024**

Electronic Signature of Signing Officer/Director Detail

Date