

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729107

FILED
Jan 12, 2015
Secretary of State
CC8145479741

Entity Name: SAND CLIFFS OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

9064 E COUNTY HWY 30-A
PANAMA CITY BEACH, FL 32413

Current Mailing Address:

9064 E COUNTY HWY 30-A
PANAMA CITY BEACH, FL 32413 US

FEI Number: 59-1546818

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMITH, RANDY
9064 E. COUNTY HWY 30-A
PANAMA CITY BCH, FL 32413 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 PD
Name ETTEN, MARV
Address PO BOX 8516
City-State-Zip: SENECA SC 29678

Title TREASURER
Name BROACH, ROBERT
Address 1806 HILLWOOD DRIVE
City-State-Zip: MONTGOMERY AL 36106

Title SECRETARY
Name HEASLETT, SHEILA
Address 9064 E COUNTY HWY 30-A
City-State-Zip: PANAMA CITY BEACH FL 32413

Title D
Name DOVE, JOHN
Address 56 FOXCHASE
City-State-Zip: DOTHAN AL 36305

Title VP
Name GILL, RICHARD
Address 3140 SOUTHVIEW
City-State-Zip: MONTGOMERY AL 36106

Title DIRECTOR
Name HAMILTON, CEIL
Address 1081 MONTEZUMA ROAD
City-State-Zip: GREENVILLE AL 36037

Title DIRECTOR
Name SWINSON, JENNIE
Address 2702 GLENN HAVEN BLVD
City-State-Zip: HOUSTON TX 77025

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: MARV ETTEN

PRESIDENT

01/12/2015

Electronic Signature of Signing Officer/Director Detail

Date