

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729107

**FILED
Mar 06, 2018
Secretary of State
CC9948598426**

Entity Name: SAND CLIFFS OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

9064 E COUNTY HWY 30-A
SEACREST BEACH, FL 32461

Current Mailing Address:

9064 E COUNTY HWY 30-A
SEACREST BEACH, FL 32461 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
SEACREST BEACH, FL 32461 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 TREASURER
Name ETTEN, MARV
Address PO BOX 8516
City-State-Zip: SENECA SC 29678

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

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

Title PRESIDENT
Name FRANCOEUR, DAVID
Address 9064 E COUNTY HWY 30-A
City-State-Zip: PANAMA CITY BEACH FL 32413

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

Title DIRECTOR
Name SHARLEY, TODD
Address 3233 SALISBURY ROAD
City-State-Zip: BIRMINGHAM AL 35213

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

Title DIRECTOR
Name MOORE, PEGGY
Address PO BOX 5300
City-State-Zip: CANTON GA 30114

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: DAVID FRANCOEUR

PRESIDENT

03/06/2018

Electronic Signature of Signing Officer/Director Detail

Date