


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 01, 2007 8:00 am
Secretary of State

08-01-2007 90034 009 ****61.25

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|--|--|--|--|
| DOCUMENT # 735002 1. Entity Name DONAX VILLAGE CONDOMINIUM ASSOCIATION, INC. | |  | |
| Principal Place of Business C/O ISLAND MANAGEMENT GROUP P.O. BOX 100 SANIBEL, FL 33957 US | | Mailing Address C/O ISLAND MANAGEMENT GROUP P.O. BOX 100 SANIBEL, FL 33957 US | |
| 2. Principal Place of Business - No P.O. Box # 732 DONAX ST. City & State SANIBEL, FL Zip 33957 Country USA | | 3. Mailing Address 732 DONAX ST. City & State SANIBEL, FL Zip 33957 Country USA | |
| 4. FEI Number 59-1659126 | | Applied For <input type="checkbox"/> Not Applicable | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent MILLER, MICHAEL 89612 CONFERENCE DR STE 2 FORT MYERS, FL 33919 | | 7. Name and Address of New Registered Agent Name: MARY E. LINSTROM Street Address (P.O. Box Number is Not Acceptable) 732 DONAX ST. City: SANIBEL, FL FL Zip Code: 33957 | |
| 8. 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. I am familiar with, and accept the obligations of registered agent. | | | |
| SIGNATURE: <i>Mary E. Linstrom</i> <small>Signature, typed or printed name of registered agent and title if applicable</small> | | DATE: <i>July 2, 2007</i> <small>(NOTE: Registered Agent signature required when reinstating)</small> | |
| Filing Fee is \$61.25 Due by September 14, 2007 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | |
| Make check payable to Florida Department of State | | | |
| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T LEVEY, ROGER 748 DONAX ST SANIBEL, FL 33957 | <input type="checkbox"/> Delete | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S CHURCHILL, BARBARA 736 DONAX ST SANIBEL, FL 33957 | <input type="checkbox"/> Delete | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D SCHUELLER, KONZ 750 DONEY ST SANIBEL, FL 33957 | <input type="checkbox"/> Delete | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD LINSTROM, MARY 732 DONAX STREET SANIBEL, FL 33957 | <input type="checkbox"/> Delete | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD SCHARBERT, ROBERT 744 DONAX STREET SANIBEL, FL 33957 | <input checked="" type="checkbox"/> Delete | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D HRABSKY, PAUL 747 CARDIUM ST. SANIBEL, FL 33957 | <input type="checkbox"/> Delete | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D HOGG, NORMAN 733 CARDIUM ST SANIBEL, FL 33957 | <input type="checkbox"/> Delete | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. | | | |
| SIGNATURE: <i>Mary E. Linstrom</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | | | |
| DATE: <i>July 2, 2007</i> <small>Daytime Phone: (239) 472-5543</small> | | | |

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