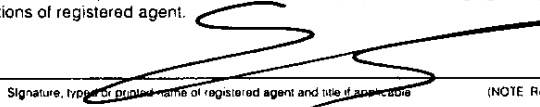
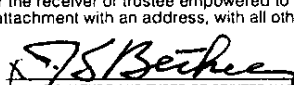


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 737276 1. Entity Name SUNSET BEACH VILLAS CONDOMINIUM ASSOCIATION, INC.				FILED 08 MAY 12 PM 1:06 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business SOUTH SEAS PLANTATION RESORT PLANTATION ROAD CAPTIVA, FL 33924 US		Mailing Address ISLAND MANAGEMENT GROUP P.O. BOX 100 SANIBEL, FL 33957 US			
2. Principal Place of Business - No P.O. Box # 711 TARPON Bay Rd		3. Mailing Address P.O. Box 100			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State SANIBEL, FL		City & State SANIBEL, FL		4. FEI Number 59-1898994	
Zip 33957		Zip 33957		Country USA	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		6. Name and Address of Current Registered Agent SOUTH SEAS PLANTATION RESORT 13000 CAPTIVA ROAD ATTN: ASSN. MGMT. CAPTIVA ISLAND, FL 33924			
7. Name and Address of New Registered Agent Name STEVEN MACKESY Street Address (P.O. Box Number is Not Acceptable) 711 TARPON Bay Rd City SANIBEL 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  Signature, type or printed name of registered agent and title if applicable		(NOTE: Registered Agent signature required when reinstating)		DATE 4/15/08	
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐ \$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	VP WEBSTER, JACK 691 CHIDESTER GLEN ELLYN, IL 60137	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DR. BETHEA, STEPHEN 1664 W. WESLEY RD NW ATLANTA, GA 30327	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SUCHY, DIANE 7 S 525 OLD COLLEGE ROAD NAPERVILLE, IL 60540	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D YOGEL, LOUIS DR 7711 NEWPORT LANE PARKLAND, FL 33067	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RAY, MAUREY 6233 PRESTON CREEK DR. DALLAS, TX 75240	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D 600129597916 05/15/08--01026--022 **61.25	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ 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:  J.S. BETHEA, III SBV 4/11/08 4043521004 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					