

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737747

FILED
Feb 10, 2009
Secretary of State

Entity Name: SANIBEL LAKE ESTATES PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

P O BOX 368
SANIBEL ISLAND, FL 33957

New Principal Place of Business:

1998 ROSEATE LANE
SANIBEL ISLAND, FL 33957

Current Mailing Address:

P O BOX 368
SANIBEL ISLAND, FL 33957

New Mailing Address:

FEI Number: 65-0037918 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WELCH, YOLANDE
1998 ROSEATE LN
SANIBEL, FL 33957 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WILSON, JOHN
Address: 1865 IBIS
City-St-Zip: SANIBEL, FL 33957

Title: 1VP () Delete
Name: WELCH, RICHARD
Address: 1998 ROSEATE LN
City-St-Zip: SANIBEL, FL 33957

Title: 2VP () Delete
Name: GRRENBERG, SUSAN
Address: 1817 IBIS LN
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: T () Delete
Name: WELCH, YOLANDE
Address: 1998 ROSEATE LN
City-St-Zip: SANIBEL, FL 33957

Title: S () Delete
Name: DOMINEK, ELEANOR
Address: 1874 IBIS LN.
City-St-Zip: SANIBEL, FL 33957

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DOMINEK, ELEANOR
Address: 1874 IBIS
City-St-Zip: SANIBEL, FL 33957

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: 2VP (X) Change () Addition
Name: GREENBERG, SUSAN
Address: 1817 IBIS LN
City-St-Zip: SANIBEL, FL 33957

Title: T&S (X) Change () Addition
Name: WELCH, YOLANDE
Address: 1998 ROSEATE LN
City-St-Zip: SANIBEL, FL 33957

Title: 3VP (X) Change () Addition
Name: WILSON, JOHN
Address: 1865 IBIS LN.
City-St-Zip: SANIBEL, FL 33957

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: YOLANDE WELCH

TS

02/10/2009

Electronic Signature of Signing Officer or Director

_____ Date