

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 09, 2009
Secretary of State**

DOCUMENT# 747588

Entity Name: CLAMSHELL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1801 OLDE MIDDLE GULF DR.
SANIBEL, FL 33957

New Principal Place of Business:

Current Mailing Address:

ISLAND MGMT
P.O. BOX 100
SANIBEL, FL 33957

New Mailing Address:

FEI Number: 59-2089078 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACKESY, STEVE
711 TARPON BAY RD
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: SD () Delete
Name: WINTERS, ROBERT C
Address: 1818 OLDE MIDDLE GULF DRIVE
City-St-Zip: SANIBEL, FL

Title: PD () Delete
Name: HANLON, MADELYN
Address: 1801-F OLDE MIDDLE GULF DR.
City-St-Zip: SANIBEL, FL

Title: TD () Delete
Name: BACHMAN, TOM
Address: 1801 OLD MIDDLE GULF
City-St-Zip: SANIBEL, FL 33957

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: MADELYN HANLON

PD

04/09/2009

Electronic Signature of Signing Officer or Director

Date