

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747588

FILED
Apr 12, 2012
Secretary of State

Entity Name: CLAMSHELL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O ISLAND MANAGEMENT
711 TARPON BAY ROAD
SANIBEL, FL 33957 US

New Principal Place of Business:

Current Mailing Address:

C/O ISLAND MANAGEMENT
P.O. BOX 100
SANIBEL, FL 33957 US

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, STEVEN
C/O ISLAND MANAGEMENT
711 TARPON BAY ROAD
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
Name: WINTERS, ROBERT
Address: 1801 OLDE MIDDLE GULF DR #B
City-St-Zip: SANIBEL, FL 33957

Title: PD
Name: HANLON, MADELYN
Address: 1801-F OLDE MIDDLE GULF DR.#F
City-St-Zip: SANIBEL, FL 33957

Title: TD
Name: BACHMAN, THOMAS
Address: CHURCH HOUSE, CHURCH LANE
City-St-Zip: BINSTED, HAMPSHIRE, X GU344NX UK

Title: D
Name: JENKINS, ROBERTA
Address: 1801 OLDE MIDDLE GULF DR #B
City-St-Zip: SANIBEL, FL 33957

Title: D
Name: DARE, ED & THERESA
Address: 108 PICADILY RD
City-St-Zip: PORT MATILDA, PA 16870

Title: D
Name: LUEBBERS, RAYMOND J
Address: 117 PICADILLY RD
City-St-Zip: PORT MATILDA, PA 16870

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: MADELYN HANLON

PD

04/12/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date