2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2004
Secretary of State

DOCUMENT# 755816

Entity Name: SIGNAL INN CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1811 OLDE MIDDLE GULF DR.
SANIBEL, FL 33957

New Principal Place of Business:

Current Mailing Address:

1811 OLDE MIDDLE GULF DR.
SANIBEL, FL 33957

New Mailing Address:

FEI Number: 59-2292066 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

REED, JEAN MARY
1341 OLDE MIDDLE GULF DR 5A
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: HICKS, RONALD B
Address: 16 FORMAN AVENUE
City-St-Zip: JAMESBURG, NJ

Title: VPD ( ) Delete
Name: STAMBAUGH, LANIER
Address: 451 CHAPAQUA ROAD
City-St-Zip: BRIARCLIFF MANOR, NY

Title: ST ( ) Delete
Name: KANE, CAROL A
Address: 7 PINEFIELD LANE
City-St-Zip: WESTON, CT

Title: D ( ) Delete
Name: MARTINI, ANGELO A SR
Address: 28 N COLLINWOOD DR
City-St-Zip: PITTSBURGH, PA 15215

Title: D ( ) Delete
Name: HARTMANN, GENE
Address: 5809 MERLOD AVENUE
City-St-Zip: EDINA, MN 55436

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: ARO, THOMAS
Address: P O BOX 852
City-St-Zip: ROCK HILL, NY 12775

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

Title: VP (X) Change ( ) Addition
Name: MARTINI, ANGELO A SR
Address: 28 N COLLINWOOD DR
City-St-Zip: PITTSBURGH, PA 15215

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RONALD B HICKS P 01/07/2004

Electronic Signature of Signing Officer or Director — Date