2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2009
Secretary of State

DOCUMENT# 766387

Entity Name: SHELL HARBOR INN RESORT & CLUB CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

937 EAST GULF DRIVE
SANIBEL, FL 33957 US

New Principal Place of Business:

Current Mailing Address:

P.O. BX 194
CAPTIVA, FL 33924 US

New Mailing Address:

FEI Number: 59-2378026 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SOUTH SEAS ISLAND RESORT
5400 PLANTATION RD
CAPTIVA, FL 33924 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:	PD	( ) Delete
Name:	KELLY, KENNETH	
Address:	PO BOX 1478	
City-St-Zip:	SANIBEL, FL 33957	
Title:	VD	( ) Delete
Name:	HARRISON, WILLIAM	
Address:	2812 HUMBOLOT AVE S	
City-St-Zip:	MINNEAPOLIS, MN 55408	
Title:	D	( ) Delete
Name:	HOLMAN, JOHN	
Address:	4036 BRAE BURN	
City-St-Zip:	MUSKEGON, MI 49441	
Title:	STD	( ) Delete
Name:	PURRONE, ROBERT	
Address:	2307 SW 39TH ST	
City-St-Zip:	CAPE CORAL, FL 33914	
Title:	D	( ) Delete
Name:	WHALEN, GARY	
Address:	111 JACOBS CRK RD	
City-St-Zip:	TRENTON, NJ 08628	

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:	
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: GARNET DASHER ASM 01/23/2009

Electronic Signature of Signing Officer or Director — Date