

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005641

FILED  
Apr 24, 2009  
Secretary of State

Entity Name: SANIBEL VIEW VILLAS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

140 ESTERO BLVD  
FORT MYERS BEACH, FL 33931

**New Principal Place of Business:**

**Current Mailing Address:**

275 ESTERO BLVD.  
FORT MYERS BEACH, FL 33931

**New Mailing Address:**

FEI Number: 34-1964791      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WAICHULIS, BILL  
275 ESTERO BLVD  
FORT MYERS BEACH, FL 33931      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: URKOVICH, RONALD  
Address: 5690 PINE TREE LANE  
City-St-Zip: SANIBEL ISLAND, FL 33957

Title: V ( ) Delete  
Name: SCHMIDT, EDWIN H  
Address: 15028 WILLISTON LN  
City-St-Zip: MINNETONKA, MN 55345

Title: S/T ( ) Delete  
Name: VIEAU, MARK  
Address: 5994 N. PIKE LAKE RD  
City-St-Zip: DULUTH, MN 55811

Title: AS ( ) Delete  
Name: PEGGY, SCARPATI  
Address: 275 ESTERO BLVD.  
City-St-Zip: FORT MYERS BEACH, FL 33931

**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:

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: PEGGY SCARPATI

AS

04/24/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date