

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Apr 09, 2009  
Secretary of State

DOCUMENT# N04000007720

Entity Name: SANDPIPER GULF RESORT I CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O R&P PROPERTY MANAGEMENT  
265 AIRPORT RD S  
NAPLES, FL 34104

**New Principal Place of Business:**

**Current Mailing Address:**

C/O R&P PROPERTY MANAGEMENT  
265 AIRPORT RD S  
NAPLES, FL 34104

**New Mailing Address:**

FEI Number: 20-1895919      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

R & P PROPERTY MANAGEMENT  
265 AIRPORT RD S  
NAPLES, FL 34104      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: LAHMAN, MICHAEL  
Address: 2146 SE 6TH AVE  
City-St-Zip: CAPE CORAL, FL 33990

Title: SD ( ) Delete  
Name: FELT, JENNIFER  
Address: 181-2 LENELL RD  
City-St-Zip: FT MYERS BEACH, FL 33931

Title: TD ( ) Delete  
Name: PULVER, PAUL  
Address: 2146 SE 4TH AVE  
City-St-Zip: CAPE CORAL, FL 33990

Title: D ( ) Delete  
Name: TRIPLETT, JAMES  
Address: 3817 FLETCHER ROAD  
City-St-Zip: AMES, IA 50010

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: LEHMAN, MICHAEL  
Address: 2146 SE 6TH AVE  
City-St-Zip: CAPE CORAL, FL 33990

Title: TD (X) Change ( ) Addition  
Name: FELT, JENNIFER  
Address: 181-2 LENELL RD  
City-St-Zip: FT MYERS BEACH, FL 33931

Title: D (X) Change ( ) Addition  
Name: SCOGNO, ROSE  
Address: 15 JULIANNA DR.  
City-St-Zip: ABSECON, NJ 08201

Title: VPD (X) Change ( ) Addition  
Name: NENDZA, DAVE  
Address: 972 WINNER CUP COURT  
City-St-Zip: NAPERVILLE, IN 60565

Title: SD ( ) Change (X) Addition  
Name: BURNETT, CHUCK  
Address: 4971 SYCAMORE DRIVE  
City-St-Zip: NAPLES, FL 34119

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: MICHAEL LEHAMAN

PD

04/09/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date