

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 27, 2008 8:00 am
Secretary of State

05-27-2008 90038 005 ****61.25

DOCUMENT # N05000009360
 1. Entity Name
SAN MARINO AT MIROMAR LAKES CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**4770 ALBERTON CT STE 2602
 NAPLES, FL 34105**

Mailing Address
**4770 ALBERTON CT STE 2602
 NAPLES, FL 34105**

40105046



DO NOT WRITE IN THIS SPACE

05192008 No Chg-NP CR2E037 (4/06)

4. FEI Number
20-3455273

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**BARNETT, LISA H
 821 FIFTH AVE S STE 201
 NAPLES, FL 34102**

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25
 Due by September 12, 2008**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BATEMAN, ARTHUR L 4770 ALBERTON CT STE 2602 NAPLES, FL 34105
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DERSCHN, JOYCE E 4770 ALBERTON CT STE 2602 NAPLES, FL 34105
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DULANEY, JO ANN 4770 ALBERTON CT STE 2602 NAPLES, FL 34105
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASM RUDLAND, MARK 12734 KENWOOD LANE ST. 49 FORT MYERS, FL 33907
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: MARK RUDLAND **5/19/08** **239-959-2999**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #