2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2005 08:00 AM
Secretary of State

DOCUMENT # N06962

1. Entity Name
COLONNADES CONDOMINIUM ASSOCIATION OF SANIBEL, INC.

Principal Place of Business	Mailing Address
COLONY RESORT 419 E. GULF DR. SANIBEL, FL 33957-1015	COLONY RESORT 419 E. GULF DR. SANIBEL, FL 33957-1015

DO NOT WRITE IN THIS SPACE

02142005 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-2051571 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

EVANS, LARRY W
419 EAST GULF DR.
SANIBEL, FL 33957

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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 May 1, 2005

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	BAGLEY, CHARLES
STREET ADDRESS	16 ROUNDHILL CT
CITY-ST-ZIP	DANVILLE, IN
TITLE	DV
NAME	STRANGE, CAROL
STREET ADDRESS	915 FITZHUGH ST
CITY-ST-ZIP	SANIBEL, FL 33957
TITLE	DT
NAME	HARTMAN, RICHARD
STREET ADDRESS	665 REHOLDA WOODS CT
CITY-ST-ZIP	KETTERINA, OH 45429
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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 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 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: Larry W. Evans LARRY W. EVANS 2-20-05 239-472-5151
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #