2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 26, 2008
Secretary of State

DOCUMENT# N18129

Entity Name: DOLPHIN INN CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6555 ESTERO BLVD.
FT. MYERS BEACH, FL 33931

New Principal Place of Business:

Current Mailing Address:

6555 ESTERO BLVD.
FT. MYERS BEACH, FL 33931

New Mailing Address:

FEI Number: 59-2747324 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

OWEN, R. TRAVIS
6555 ESTERO BLVD.
FT. MYERS, 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:	OWEN, RICHARD T	
Address:	6555 ESTERO BLVD	
City-St-Zip:	FORT MYERS BEACH, FL 33931	
Title:	VP	( ) Delete
Name:	MARBURGER, ROSS E	
Address:	1091 JEFFERSON COURT	
City-St-Zip:	NEWBURGH, IN 47630	
Title:	S	( ) Delete
Name:	LINDLEY, JERRY A	
Address:	6470 N. CO RD 1120 E.	
City-St-Zip:	CHARLESTON, IL 61920	
Title:	T	( ) Delete
Name:	OWEN, JOSEPH P	
Address:	17 DORAL COURT	
City-St-Zip:	MATTOON, IL 61938	

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: R. TRAVIS OWEN P 08/26/2008

Electronic Signature of Signing Officer or Director — Date