

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40099

**FILED**  
**Mar 31, 2010**  
**Secretary of State**

**Entity Name:** THE SANCTUARY AT BONITA BAY HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O STERLING PROPERTY  
27180 BAY LANDING DR STE 4  
BONITA SPRINGS, FL 34135 US

**New Principal Place of Business:**

27180 BAY LANDING DR  
SUITE 4  
BONITA SPRINGS, FL 34135 US

**Current Mailing Address:**

C/O STERLING PROPERTY  
27180 BAY LANDING DR STE 4  
BONITA SPRINGS, FL 34135 US

**New Mailing Address:**

27180 BAY LANDING DR  
SUITE 4  
BONITA SPRINGS, FL 34135 US

FEI Number: 31-1337244

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

O'GORMAN, JOHN  
C/O STERLING PROPERTY SRVS  
27180 BAY LANDING DRIVE, STE. 4  
BONITA SPRINGS, FL 34135 US

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

STERLING PROPERTY SERVICES  
27180 BAY LANDING DR  
SUITE 4  
BONITA SPRINGS, FL 34135 US

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: JOHN O'GORMAN

03/31/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: RUSSELL, LARRY  
Address: 4200 SANCTUARY WAY  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: VP  
Name: PACI, JOHN  
Address: 4225 SANCTUARY WAY  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: DP  
Name: HANSON, MIKE  
Address: 4276 SANCTUARY WAY  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: DT  
Name: DUREI, CARL  
Address: 4337 SANCTUARY WAY  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: DS  
Name: FARR, HAP  
Address: 4356 SANCTUARY WAY  
City-St-Zip: BONITA SPRINGS, FL 34134

I hereby 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 all other like empowered.

SIGNATURE: MIKE HANSON

DP

03/31/2010

Electronic Signature of Signing Officer or Director

Date