

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008 8:00 am
Secretary of State

04-29-2008 90079 026 ****61.25

DOCUMENT # N44761 1. Entity Name NANTUCKET I CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business STERLING MANAGEMENT, INC. 1701-B RICKENBACKER DRIVE SUN CITY CENTER, FL 33573		Mailing Address STERLING MANAGEMENT, INC. 1701-B RICKENBACKER DRIVE SUN CITY CENTER, FL 33573	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Sterling Management 1904 Clubhouse Drive Sun City Center, FL 33573		4. FEI Number 59-3124225	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		Applied For Not Applicable	
6. Name and Address of Current Registered Agent LAW OFFICES OF JAMES R. DE FURIO, P.A. 201 E KENNEDY BLVD STE 1460 TAMPA, FL 33602		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP PD RAMSEY, CAROL 2402 NATUCKET HARBOR LOOP SUN CITY CENTER, FL 33573	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP SD Margaret Ehlers 2416 Nantucket Harbor Loop. Sun City Center Fl. 33573	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP VD WILDASIN, JAY 2459 NANTUCKET HARBOR LP SUN CITY CENTER, FL 33573	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TD Mary Ann Meeker 2413 Old Nantucket Ct. Sun City Center 33573	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP SD WILLIAMS, ALICE 2403 OLD NANTUCKET CT SUN CITY CENTER, FL 33573	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP D. Tom Ostrander 2419 Nantucket Harbor Loop. Sun City Center Fl. 33573	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TD BROCATO, MICKIE 2425 NATUCKET HARBOR LOOP SUN CITY CENTER, FL 33573	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP D LOHN, JULIA 2430 NANTUCKET HARBOR LOOP SUN CITY CENTER, FL 33573	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP D HUNEWILL, BETTY 2466 NANTUCKET HARBOR LP SUN CITY CENTER, FL 33573	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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: <i>Carol K Ramsey, Pres</i>		Date: <i>3/04/08</i>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone #	

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