

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000003483

FILED
Mar 12, 2008
Secretary of State

Entity Name: SIGNAL INN BEACH & RACQUETBALL, INC.

Current Principal Place of Business:

1811 OLDE MIDDLE GULF DRIVE
SANIBEL, FL 33957

New Principal Place of Business:

Current Mailing Address:

1811 OLDE MIDDLE GULF DRIVE
SANIBEL, FL 33957

New Mailing Address:

FEI Number: 65-0371479

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUBIN, HERBERT
713 RABBIT ROAD
SANIBEL, FL 33957 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: MARTINI, ANGELO A SR
Address: 28 N COLLINWOOD DR
City-St-Zip: PITTSBURGH, PA 15215

Title: T () Delete
Name: RUBIN, HERBERT
Address: 713 RABBIT ROAD
City-St-Zip: SANIBEL, FL 33957

Title: P () Delete
Name: ARO, THOMAS
Address: P O BOX 852
City-St-Zip: ROCK HILL, NY 12775

Title: S () Delete
Name: KANE, CAROL A
Address: 7 PINEFIELD LANE
City-St-Zip: WESTON, CT

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: S (X) Change () Addition
Name: BARTOK, PETER
Address: 321 W BURNAM ROAD
City-St-Zip: COLUMBIA, MO 65203

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS ARO

P

03/12/2008

Electronic Signature of Signing Officer or Director

_____ Date