2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36643

FILED Mar 31, 2009 Secretary of State

Entity Name: SAN MARINO IN PELICAN BAY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1044 CASTELLO DRIVE SUITE 206 NAPLES, FL 34103

New Mailing Address: Current Mailing Address:

%SOUTHWEST PROPERTY MGMT. 1044 CASTELLO DRIVE #206 NAPLES, FL 34103

FEI Number: 65-0235584 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SOUTHWEST PROPERTY MANAGEMENT CORP. 1044 CASTELLO DR. SUITE 206 NAPLES, FL 34103 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition LANDERS, CLIFF DARROW, TED Name: Name: 6865 SAN MARINO DR #305 Address: 6850 SAN MARINO DRIVE, #105 Address: City-St-Zip: NAPLES, FL 34108 City-St-Zip: NAPLES, FL 34108

Title: () Delete Title: () Change () Addition RAMSDEN, RICHARD Name: Name:

Address: 6825 SAN MARINO DR., #514 Address: City-St-Zip: NAPLES, FL 34108 City-St-Zip:

Title: () Delete Title: PD (X) Change () Addition SKOLNICK, ROBERT SEIDEL, STEVE Name: Name:

6820 SAN MARINO DR., #601 6830 SAN MARINO DRIVE, #712 Address: Address:

City-St-Zip: NAPLES, FL 34108 City-St-Zip: NAPLES, FL 34108

(X) Change () Addition Title: () Delete Title: Name: KARAFFA, MIKE Name: KARAFFA, MIKE

6860 SAN MARINO DR., #401 6860 SAN MARINO DR., #401 Address: Address:

City-St-Zip: NAPLES, FL 34108 City-St-Zip: NAPLES, FL 34108

Title: () Delete Title: (X) Change () Addition

SEIDEL, STEPHEN HANSON, DAVE Name: Name:

6820 SAN MARINO DRIVE, #605 6830 SAN MARINO DR., #712 Address: Address:

NAPELS, FL 34108 NAPELS, FL 34108 City-St-Zip: 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: STEVE SEIDEL Ρ 03/31/2009