2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50937

Entity Name: SANCTUARY GOLF VILLAGES I CONDOMINIUM ASSOCIATION,

INC.

FILED
Apr 22, 2024
Secretary of State
0536117291CC

Current Principal Place of Business:

C/O ISLAND MANAGEMENT 711 TARPON BAY ROAD SANIBEL, FL 33957

Current Mailing Address:

C/O ISLAND MANAGEMENT P.O. BOX 100 SANIBEL, FL 33957 US

FEI Number: 65-0397829 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LODWICK, STEPHEN C/O ISLAND MANAGEMENT 711 TARPON BAY ROAD SANIBEL, FL 33957 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: STEPHEN LODWICK 04/22/2024

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title VP Title SECRETARY

Name HAIR, GREG Name SCHIFFER, LAURIE

Address C/O ISLAND MANAGEMENT Address C/O ISLAND MANAGEMENT

P.O. BOX 100 P.O. BOX 100

City-State-Zip: SANIBEL FL 33957 City-State-Zip: SANIBEL FL 33957

Title TREASURER Title DIRECTOR

NameSCHIFFER, LAURENCENameVERITY, RICHARDAddressC/O ISLAND MANAGEMENTAddress711 TARPON BAY RD

P.O. BOX 100 City-State-Zip: SANIBEL FL 33957

City-State-Zip: SANIBEL FL 33957

Title PRESIDENT Title DIRECTOR

Name PETLZMAN, SUSAN
Name LARKIN, GREGORY

Address C/O ISLAND MANAGEMENT P.O. BOX 100

SS C/O ISLAND MANAGEMENT P.O. BOX 100
P.O. BOX 100

City-State-Zip: SANIBEL FL 33957

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: GREGORY LARKIN PRESIDENT 04/22/2024