

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723179

FILED
Apr 09, 2008
Secretary of State

Entity Name: SUNDIAL OF SANIBEL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1501 MIDDLE GULF DRIVE
BOX 10
SANIBEL ISLAND, FL 33957

New Principal Place of Business:

Current Mailing Address:

PO BOX 10
SANIBEL ISLAND, FL 33957

New Mailing Address:

FEI Number: 59-1544807

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOODE, STACY
1501 MIDDLE GULF DR
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

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: HARRIS, CANDACE
Address: 3457 INNSBROOK DR
City-St-Zip: ROCHESTER HILLS, MI 11040

Title: P () Delete
Name: BUECKER, TED
Address: 62 N FOX MILL LANE
City-St-Zip: SPRINGFIELD, IL 62712

Title: T () Delete
Name: LUCHT, GEORGE
Address: 457 RICE LAKE RD
City-St-Zip: MAPLE GROVE, MN 55369

Title: D () Delete
Name: CUSMANO, CAROL
Address: 69289 BROOKHILL DR
City-St-Zip: ROMEO, MI 48065

Title: D () Delete
Name: JOHNSON, JIM
Address: 561 MISSION HOUSE LANE
City-St-Zip: SAINT PAUL, MN 55112

Title: VP () Delete
Name: WEBSTER, CARL
Address: 945 IRONWOOD AVE
City-St-Zip: DARIEN, IL 60561

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: D (X) Change () Addition
Name: LEDGERWOOD, THOMAS
Address: 1317 CROWN COURT
City-St-Zip: BLOOMINGTON, IL 61704

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: CANDACE HARRIS

SEC

04/09/2008

Electronic Signature of Signing Officer or Director

Date