

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733890

FILED  
Mar 13, 2009  
Secretary of State

Entity Name: SANIBEL BAYOUS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

P.O. BOX 1633  
SANIBEL, FL 33957

**New Principal Place of Business:**

5289 LADYFINGER LAKE RD  
SANIBEL, FL 33957

**Current Mailing Address:**

P.O. BOX 1633  
SANIBEL, FL 33957

**New Mailing Address:**

FEI Number: 59-1737348      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

DONOVAN, ROBERT  
5293 UMBRELLA POOL RD.  
SANIBEL, FL 33957 US

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

HASSELMAN, RICHARD B  
5289 LADYFINGER LAKE RD.  
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: RICHARD B. HASSELMAN

03/13/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: GINIPRO, ANDREW  
Address: 4619 BRAINARD BAYOU RD  
City-St-Zip: SANIBEL, FL 33957

Title: VP ( ) Delete  
Name: FINNELL, PHILIP P  
Address: 4626 BRAINARD BAYOU RD  
City-St-Zip: SANIBEL, FL 33957

Title: SD ( ) Delete  
Name: SHIMBERG, STEPHEN H  
Address: 4562 BOWEN BAYOU RD.  
City-St-Zip: SANIBEL, FL 33957

Title: TD ( ) Delete  
Name: DONOVAN, ROBERT  
Address: 5293 U MBRELLA POOL RD  
City-St-Zip: SANIBEL, FL 33957

Title: D ( ) Delete  
Name: KIRCHNER, MATTHEW A  
Address: 5279 LADY FINGER LAKE RD.  
City-St-Zip: SANIBEL, FL 33957

**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: TD (X) Change ( ) Addition  
Name: HASSELMAN, RICHARD B  
Address: 5289 LADYFINGER LAKE RD.  
City-St-Zip: SANIBEL, FL 33957

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: RICHARD B. HASSELMAN

TD.

03/13/2009

Electronic Signature of Signing Officer or Director

Date