2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734968

FILED Apr 25, 2005 Secretary of State

Entity Name: VILLA SANIBEL CONDOMINIUM ASSOCIATION, INC.

Current Princip	oal Place of Business:	New Princi	pal Place of Business:

2321 WEST GULF DR. 2321 WEST GULF DR. P. O. BOX 694 SANIBEL, FL 33957 SANIBEL, FL 33957

Current Mailing Address: New Mailing Address:

P.O. BOX 964 PO BOX 6017

SANIBEL, FL 33957 FORT MYERS BEACH, FL 33932

FEI Number: 59-1659116 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:

CANTY, DEBRA MIDDLETON, CR 6062 DINKINS LAKE ROAD 100 LOVERS LANE

SANIBEL, FL 33957 US FORT MYERS BEACH, FL 33931 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: CR MIDDLETON 04/25/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD () Delete Title: T (X) Change () Addition Name: MEZERA, JAMES Name: MEZERA, JAMES

 Name
 MEZEIKA, SAMES

 Address:
 15460 SANTA MARIA DR.

 City-St-Zip:
 BROOKFIELD, WI 53005

 Raddress:
 15460 SANTA MARIA DR.

 City-St-Zip:
 BROOKFIELD, WI 53005

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

 Name:
 SMITH, WILLIAM
 Name:
 SMITH, WILLIAM

 Address:
 400 ATLANTIC AVE
 Address:
 BOX 808

City-St-Zip: COHASSET, MA 02025 City-St-Zip: NEW CASTLE, NH 03854

Title: VD () Delete Title: VP (X) Change () Addition Name: JOHNSON, RITA Name: INTAGLIATA, SHAWN

Address: 11144 MALAYSIA CIRCLE Address: 41 CLERMONT LANE
City-St-Zip: BOYNTON BEACH, FL 33437 City-St-Zip: LADUE, MO 63124

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

 Name:
 Name:
 CAMPBELL, MARCELLA

 Address:
 Address:
 16 PRESCOTT ST

 City-St-Zip:
 City-St-Zip:
 NEWTONVILLE, MA 02460

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

 Name:
 Name:
 HAZELTON, NANCY

 Address:
 Address:
 3603 PIROGUE RD

 City-St-Zip:
 City-St-Zip:
 LOUISVILLE, KY 40299

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WILLIAM SMITH P 04/25/2005