

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742921

FILED  
Mar 30, 2009  
Secretary of State

**Entity Name:** THE SANDCASTLE CONDOMINIUM, INC.

**Current Principal Place of Business:**

187 FOREST LAKES BLVD.  
NAPLES, FL 34105

**New Principal Place of Business:**

**Current Mailing Address:**

187 FOREST LAKES BLVD.  
NAPLES, FL 34105 US

**New Mailing Address:**

**FEI Number:** 59-1933931

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GRACEY, ROBERT  
187 FOREST LAKES BLVD.  
NAPLES, FL 34105 US

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

GRACEY, ROBERT T SR.  
187 FOREST LAKES BLVD.  
NAPLES, FL 34105 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: ROBERT T. GRACEY, SR.

03/30/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VD ( ) Delete  
Name: NADDRA, GERALD  
Address: 9517 GULFSHORE DR., #403  
City-St-Zip: NAPLES, FL 34108

Title: PD ( ) Delete  
Name: FRENCH, STEPHEN  
Address: 9517 GULFSHORE DR. #202  
City-St-Zip: NAPLES, FL 34106

Title: S ( ) Delete  
Name: GRACEY, ROBERT  
Address: 187 FOREST LAKES BLVD.  
City-St-Zip: NAPLES, FL

Title: DVP ( ) Delete  
Name: PARKER, JOAN  
Address: 9517 GULFSHORE BLVD, STE 303  
City-St-Zip: NAPLES, FL 34108

**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: ( ) 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: ROBERT T. GRACEY, SR.

TREA

03/30/2009

Electronic Signature of Signing Officer or Director

Date