

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743782

FILED
Mar 10, 2009
Secretary of State

Entity Name: SHELL ISLE CONDOMINIUM, INC.

Current Principal Place of Business:

PANAMA COURT
P.O. BOX 1944
MARCO ISLAND, FL 33969

New Principal Place of Business:

898 PANAMA COURT
MARCO ISLAND, FL 34145

Current Mailing Address:

PANAMA COURT
P.O. BOX 1944
MARCO ISLAND, FL 33969

New Mailing Address:

P.O. BOX 1944
MARCO ISLAND, FL 34146

FEI Number: 59-1012332

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EICHMAN, RICHARD
902 PANAMA CT.
MARCO ISLAND, FL 34145 US

Name and Address of New Registered Agent:

RESORT MANAGEMENT
834 BALD EAGLE DRIVE
MARCO ISLAND, FL 34145 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: RICK YACONO

03/10/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: EICHMANN, RICK
Address: 902 BAHAMA CT 3
City-St-Zip: MARCO ISLAND, FL 34145

Title: STD () Delete
Name: SINCLAIR, TED
Address: 900 PANAMA CT # 3
City-St-Zip: MARCO ISLAND, FL 34145

Title: VPD () Delete
Name: HARRIS, BRIAN
Address: P.O. BOX 1296
City-St-Zip: MEDINA, OH 44256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SINCLAIR, EDWIN JR
Address: 900 PANAMA COURT #3
City-St-Zip: MARCO ISLAND, FL 34145

Title: SD (X) Change () Addition
Name: BUONO, ROBERT
Address: 4 PRINCETON STREET
City-St-Zip: NORWALK, CT 06851

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: EDWIN SINCLAIR JR.

P

03/10/2009

Electronic Signature of Signing Officer or Director

Date