

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 17, 2004 08:00 AM
Secretary of State

DOCUMENT # 744372	
1. Entity Name SUNDIAL EAST CONDOMINIUM ASSOCIATION, INC.	



Principal Place of Business 1401 MIDDLE GULF DR. SANIBEL, FL 33957 US	Mailing Address 1401 MIDDLE GULF DR. SANIBEL, FL 33957 US
---	---



01062004 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1976653	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent HULDRUM, KATHLEEN M. 1401 MIDDLE GULF DRIVE SANIBEL, FL 33957

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when registering) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

**000000055020
02/17/04-80020-005 61.25**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD KING, JAMES 24 CEDAR PLACE GARDEN CITY, NY
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD CARMINE, RENDE 1401 MIDDLE GULF DRIVE, #5403 SANIBEL, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CONLEY, THOMAS 1739 MILLSTREAM BALLWIN, MO
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BAHN, MARY 5075 JOEWOOD DR. SANIBEL, FL 339578
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD RICHARD L MCCANDLESS 1677 TREASURE LAKE DU BOIS, PA 15801
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AST HULDRUM, KATHLEEN 16090 BENTWOOD PALMO DR. FORT MYERS, FL 33908

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kathleen M Huldrum Kathleen M Huldrum, Asst. Sec. 2/13/04 239 472-0062
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Copying Phone #