

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751872

FILED
Jan 17, 2007
Secretary of State

Entity Name: CONDOMINIUM ASSOCIATIONS OF SANIBEL, INC.

Current Principal Place of Business:

2807 CORTEZ BLVD.
FORT MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1041
SANIBEL, FL 33957

New Mailing Address:

FEI Number: 59-2381698

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, SONJA
2807 CORTEZ BLVD.
FORT MYERS, FL 33901 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DS () Delete
Name: HANLON, MADDY
Address: 1801 OLDE MIDDLE GULF DRIVE, F
City-St-Zip: SANIBEL, FL 33957

Title: VD () Delete
Name: REILLY, MARCIA
Address: 1605 WEST GULF DRIVE #201
City-St-Zip: SANIBEL, FL 33957

Title: PD () Delete
Name: NATON, LINDA M
Address: 3215 WEST GULF DRIVE
City-St-Zip: SANIBEL, FL 33957

Title: DT () Delete
Name: BARKER, KAREN
Address: 1789 LOCUST ROAD
City-St-Zip: SEWICKLEY, PA 151438556

Title: D () Delete
Name: MARY, NELSON
Address: P.O. BOX 517
City-St-Zip: FISH CREEK, WI 54212

Title: () Delete
Name:
Address:
City-St-Zip:

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:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: WEISS, RICHARD
Address: 780 SEXTANT DRIVE
City-St-Zip: SANIBEL, FL 33957

I hereby certify that the information supplied with this filing does not qualify for the 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: LINDA NATON

PD

01/17/2007

Electronic Signature of Signing Officer or Director

Date