

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753886

FILED
Apr 19, 2011
Secretary of State

Entity Name: WHITECAPS SOUTH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O SANISAL ENTERPRISES
186 SOUTHWINDS DR.
SANIBEL, FL 33957 US

New Principal Place of Business:

Current Mailing Address:

C/O SANISAL ENTERPRISES
186 SOUTHWINDS DR.
SANIBEL, FL 33957 US

New Mailing Address:

FEI Number: 59-2212934

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHENEY, ROBERT J
SANISAL ENTERPRISES
186 SOUTHWINDS DR.
SANIBEL, FL 33957 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: D
Name: HOFFMAN, MICHAEL
Address: 2877 WEST GULF DR. # 9
City-St-Zip: SANIBEL, FL 33957 US

Title: TD
Name: GROSS, RICHARD
Address: 2877 WEST GULF DR. #3
City-St-Zip: SANIBEL, FL 33957

Title: D
Name: BAYSINGER, MARY
Address: 2877 WEST GULF DR #6
City-St-Zip: SANIBEL, FL 33957

Title: SD
Name: KRETER, LAURA
Address: 2877 WEST GULF DR #2
City-St-Zip: SANIBEL, FL 33957

Title: VD
Name: FORWARD, JIMI
Address: 2877 W GULF DRIVE #4
City-St-Zip: SANIBEL, FL 33957

Title: PD
Name: FARLEY, MICHAEL
Address: 2877 WEST GULF DRIVE, # 8
City-St-Zip: SANIBEL, FL 33957

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL FARLEY

PD

04/19/2011

Electronic Signature of Signing Officer or Director

Date