2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754371

FILED Feb 06, 2006 Secretary of State

Entity Name: THE SANDCASTLE I CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 730 S COLLIER BLVD. MARCO ISLAND, FL 34145 **Current Mailing Address: New Mailing Address:** 730 S COLLIER BLVD. MARCO ISLAND, FL 34145 FEI Number: 59-2030605 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SAMOUCE, MURRELL & GAL, PA 5405 PARK CENTRAL COURT NAPLES, FL 34109 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition SHAFER, WILLIAM G Name: Name: 730 S. COLLIER BLVD. #607 Address: Address: City-St-Zip: MARCO ISLAND, FL 34145 City-St-Zip: Title: PD Title: () Delete () Change () Addition MIELLO, MARY Name: Name: Address: 719 MEADOW ROAD Address: City-St-Zip: SMITHTOWN, NY 11787 City-St-Zip: Title: SD () Delete Title: () Change () Addition MARRA, JOSEPHINE Name: Name: 18 BERKELEY SQUARE Address: Address: City-St-Zip: BERKELEY HEIGHTS, NJ 07922 City-St-Zip: (X) Change () Addition Title: 2VP () Delete Title: 2VP BOYDSTON, JIM Name: NEVINS, RICHARD Name: 730 S. COLLIER BLVD. #1202 730 S. COLLIER BLVD. #602 Address: Address: City-St-Zip: MARCO ISLAND, FL 34145 City-St-Zip: MARCO ISLAND, FL 34145 Title: () Delete Title: (X) Change () Addition NOLAN, THOMAS DOOLEY, FRANK Name: Name: 730 S COLLIER #1305 730 S COLLIER #301 Address: Address: City-St-Zip: MARCO ISLAND, FL 34145 City-St-Zip: MARCO ISLAND, FL 34145

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: WILLIAM G. SHAFER TD 02/06/2006