## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 754572** 

FILED Mar 28, 2011 Secretary of State

Entity Name: SNUG HARBOR CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O ISLAND MANAGEMENT GROUP
711 TARPON BAY RD
SANIBEL, FL 33957 US
C/O ISLAND MANAGEMENT
711 TARPON BAY ROAD
SANIBEL, FL 33957 US
SANIBEL, FL 33957 US

Current Mailing Address: New Mailing Address:

C/O ISLAND MANAGEMENT GROUP
P.O. BOX 100
SANIBEL, FL 33957 US

C/O ISLAND MANAGEMENT
P.O. BOX 100
SANIBEL, FL 33957 US

FEI Number: 59-2075712 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:

MACKESY, STEVEN J
C/O ISLAND MANAGEMENT GROUP
711 TARPON BAY RD
SANIBEL, FL 33957 US

MACKESY, STEVEN J
C/O ISLAND MANAGEMENT
711 TARPON BAY ROAD
SANIBEL, FL 33957 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: STEVEN MACKESY 03/28/2011

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PD

Name: ENGEN, DONALD

Address: 303 PERIWINKLE WAY #114 City-St-Zip: SANIBEL, FL 33957

Title: VD

Name: LAGUARDIA, THOMAS
Address: 303 PERIWINKLE WAY #112
City-St-Zip: SANIBEL, FL 33957

Title: STD

Name: HANNON, ED

Address: 303 PERIWINKLE WAY #221 City-St-Zip: SANIBEL, FL 33957

Title:

Name: WALLACE, RICHARD

Address: 303 PERIWINKLE WAY # 312

City-St-Zip: SANIBEL, FL 33957

Title: D

Name: ZIMMER, JEFF

Address: 303 PERIWINKE WAY #122 City-St-Zip: SANIBEL, FL 33957

Title: D

 Name:
 DWYER, HOWARD

 Address:
 303 PERIWINKLE WAY #222

 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: DONALD ENGEN PD 03/28/2011