

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755926

FILED
Feb 11, 2009
Secretary of State

Entity Name: SUNSET CAPTIVA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

14970 CAPTIVA DR
CAPTIVA, FL 33924 US

New Principal Place of Business:

15050 CAPTIVA DRIVE
CAPTIVA, FL 33924 US

Current Mailing Address:

PO BOX 189
CAPTIVA, FL 33924

New Mailing Address:

FEI Number: 59-2263572

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OYAL SHELL VACATIONS, INC.
2300 PERIWINKLE WAY
SUITE 3
SANIBEL, FL 33957 US

Name and Address of New Registered Agent:

ROYAL SHELL VACATIONS, INC.
2300 PERIWINKLE WAY
SUITE 3
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: RANDY BACIK

02/11/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SHERLOCK, SUE
Address: 472 SHORE RD, PO BOX 435
City-St-Zip: NORTH TRURO, MA 02652

Title: VP () Delete
Name: MASON, JOSEPH
Address: P.O. BOX 87
City-St-Zip: CAPTIVA, FL 33924

Title: STD () Delete
Name: FITZGERALD, ALICE
Address: 1600 PRINCE ST STE 109
City-St-Zip: ALEXANDRIA, VA 22314

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SHERLOCK, SUE
Address: 472 SHORE RD, PO BOX 435
City-St-Zip: NORTH TRURO, MA 02652

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

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

I hereby certify that the information supplied with this filing does not qualify 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: SUE SHERLOCK

PD

02/11/2009

Electronic Signature of Signing Officer or Director

Date