

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761281

FILED
Mar 23, 2009
Secretary of State

Entity Name: SANIBEL SHORES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1633 B PERIWINKLE WAY
SANIBEL, FL 33957 US

New Principal Place of Business:

1633 G PERIWINKLE WAY
SANIBEL, FL 33957 US

Current Mailing Address:

1633 PERIWINKLE WAY
STE. G
SANIBEL, FL 33957 US

New Mailing Address:

FEI Number: 59-2208316 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROGUSKA, BRENDA
1633 PERIWINKLE WAY #G
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: PD () Delete
Name: EDMONSTON, JACK
Address: 9 STONEFIELD DRIVE
City-St-Zip: EAST SANDWICH, MA 02537

Title: VDP () Delete
Name: MCKINLEY, SARA
Address: 4631 NW 100TH WAY
City-St-Zip: CORAL SPRINGS, FL 33076

Title: MD () Delete
Name: ROGUSKA, BRENDA
Address: 1633 PERIWINKLE WAY, STE. G
City-St-Zip: SANIBEL, FL 33957

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:

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: BRENDA R. ROGUSKA

MD

03/23/2009

Electronic Signature of Signing Officer or Director

_____ Date