2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#766243

FILED Mar 26, 2009 Secretary of State

Entity Name: SANDPIPER CONDOMINIUM ASSOCIATION OF MARCO ISLAND, INC.

Current Principal Place of Business: New Principal Place of Business: 850 SOUTH COLLIER BLVD. MARCO ISLAND, FL 33937 **Current Mailing Address: New Mailing Address:** 850 SOUTH COLLIER BLVD. MARCO ISLAND, FL 33937 FEI Number: 59-2262504 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: GREUSEL, JAMIE B 1104 NO COLLIER BLVD MARCO ISLAND, FL 34145 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: SDTD () Delete () Change () Addition JAKALSKI, DON Name: Name: 850 S COLLIER BLVD Address: Address: City-St-Zip: MARCO ISLAND, FL 34145 City-St-Zip: Title: PD () Delete Title: () Change () Addition DOHLEN, JERRY Name: Name: Address: 850 S. COLLINS BLVD #1803 Address: City-St-Zip: MAROC ISLAND, FL 34145 City-St-Zip: Title: () Delete Title: () Change () Addition PAPPAS, JOHN DR Name: Name: 850 S COLLIER BLVD STE 1102 Address: Address: City-St-Zip: MARCO ISLAND, FL 34145 City-St-Zip: Title: () Delete Title: () Change () Addition HINTERMEISTE, MATHEW Name: Name: Address: 136 COUNTRY CLUB DR Address: City-St-Zip: TELLURIDE, CO 81435 City-St-Zip: Title: () Delete Title: VPD (X) Change () Addition BERGGREN, JOAN BERGGREN, JOAN Name: Name: 850 S. COLLIER BLVD #1202 850 S. COLLIER BLVD #1202 Address: Address: City-St-Zip: MARCO ISLAND, FL 34145 City-St-Zip: MARCO ISLAND, FL 34145 Title: () Delete Title: () Change () Addition LYNG. THOMAS Name: Name: Address: 850 S. COLLINS BLVD #103 Address: MAROC ISLAND, FL 34145 City-St-Zip: 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: JERRY DOHLEN PRES 03/26/2009