2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 02, 2008 08:00 Al Secretary of State DOCUMENT # F96000005017 WHY KNOT SANIBEL, INC. Principal Place of Business Mailing Address 2340 PERIWINKLE WAY 2340 PERIWINKLE WAY SANIBEL ISLAND, FL 33957 SANIBEL ISLAND, FL 33957 03222008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 52-1886724 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CHIARMONTE, JENNIFER DO NOT WRITE 2340 PERIWINKLE WAY, SUITE A SANIBEL ISLAND, FL 33957 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and tide if applicable DATE (NOTE, Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be 000000877575 Trust Fund Contribution Added to Fees OFFICERS AND DIRECTORS 10. PTD TITLE CHIARMONTE, JOAN NAME STREET ADDRESS 297 FERRY LANDING DRIVE CITY-ST-ZIP SANIBEL, FL 33957 TITLE CHIARMONTE, VINCENT NAME STREET ADDRESS 297 FERRY LANDING DRIVE CITY-ST-ZIP SANIBEL, FL 33957 TITLE NAME STREET ADDRESS DO NOT WRITE CHY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP .

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

THLE NAME STREET ADDRESS

Davlime Phone #