


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2007 8:00 am
Secretary of State

05-03-2007 90055 022 ****61.25

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1. Entity Name
SANCTUARY IV, SUB PHASE B HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
**11129 SANCTUARY DRIVE
 BRADENTON, FL 34209**

Mailing Address
**11129 SANCTUARY DRIVE
 BRADENTON, FL 34209**

40103603



2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
P.O. Box 916
 Suite, Apt. #, etc.

City & State
Bradenton, FL 34206

Zip Country
 Zip Country

04242007 Chg-NP CR2E037 (12/06)

4. FEI Number
01-0627097

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

ERBE, STUART
11120 SANCTUARY DRIVE
BRADENTON, FL 34209

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	ERBE, STUART	
STREET ADDRESS	11120 SANCTUARY DRIVE	
CITY-ST-ZIP	BRADENTON, FL 34209	
TITLE	V	<input type="checkbox"/> Delete
NAME	KING, ROBINSON	
STREET ADDRESS	11129 SANCTUARY DRIVE	
CITY-ST-ZIP	BRADENTON, FL 34209	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	MC CONOUGHAY, KENNETH	
STREET ADDRESS	11218 SANCTUARY DRIVE	
CITY-ST-ZIP	BRADENTON, FL 34209	
TITLE	S	<input type="checkbox"/> Delete
NAME	FARRAR, DOUG	
STREET ADDRESS	11116 SANCTUARY DRIVE	
CITY-ST-ZIP	BRADENTON, FL 34209	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Lansinger, James	
STREET ADDRESS	11117 Sanctuary Dr.	
CITY-ST-ZIP	Bradenton, FL 34209	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Jory, David	
STREET ADDRESS	11206 Sanctuary Dr.	
CITY-ST-ZIP	Bradenton, FL 34209	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing 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 617, 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.

SIGNATURE: Stuart G. Erbe **Stuart Erbe** 4/27/07 941-746-4998
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #