## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N0000001368

FILED Jan 12, 2009 Secretary of State

Entity Name: SAND TRAP VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

7211 WINKLER ROAD FT. MYERS, FL 33919

Current Mailing Address: New Mailing Address:

7211 WINKLER ROAD FT. MYERS, FL 33919

FEI Number: 65-1025656 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:

GARPER, JERETTA9
7211 WIAKLAN ROAD
FT. MYERS, FL 33919
US
BURNS, KEVIN
7211 WINKLER ROAD
FT. MYERS, FL 33919
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: KEVIN BURNS 01/12/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: PTD ( ) Delete Title: PTD (X) Change ( ) Addition

 Name:
 GROSS, EDWARD
 Name:
 NELSON, JOHN

 Address:
 7209 WINKLER RD.
 Address:
 7209 WINKLER RD.

 City-St-Zip:
 FORT MYERS, FL 33919
 City-St-Zip:
 FORT MYERS, FL 33919

Title: TD ( ) Delete Title: TD (X) Change ( ) Addition

 Name:
 GARNER, JERETTA
 Name:
 BURNS, KEVIN

 Address:
 7211 WINKLER RD.
 Address:
 7211 WINKLER RD.

 City-St-Zip:
 FORT MYERS, FL 33919
 City-St-Zip:
 FORT MYERS, FL 33919

Title: SD () Delete Title: () Change () Addition

 Name:
 NELSON, LYDIA
 Name:

 Address:
 7209 WINKLER RD.
 Address:

 City-St-Zip:
 FT. MYERS, FL 33919
 City-St-Zip:

Title: PD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 NELSON, JOHN
 Name:

 Address:
 7209 WINKLER RD.
 Address:

 City-St-Zip:
 FORT MYERS, FL 33919
 City-St-Zip:

Title: VPD ( ) Delete Title: VPD (X) Change ( ) Addition

 Name:
 HAGEN, LINDA
 Name:
 HAGEN, LINDA

 Address:
 9213 WINKLER RD.
 Address:
 7213 WINKLER RD.

 City-St-Zip:
 FORT MYERS, FL 33919
 City-St-Zip:
 FORT MYERS, FL 33919

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: KEVIN BURNS TD 01/12/2009