

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00222

FILED
Apr 14, 2009
Secretary of State

Entity Name: HIGH TIDE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

P. O. BOX 190
SANIBEL, FL 33957

New Principal Place of Business:

WEST GULF DRIVE
SANIBEL, FL 33957

Current Mailing Address:

15751 SAN CARLOS BLVD #8
FT MYERS, FL 33908

New Mailing Address:

FEI Number: 59-2417582 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

DG SUITOR AND ASSOCIATES
15751 SAN CARLOS BLVD #8
FT MYERS, FL 33908 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: P (X) Delete
Name: ROBISON, LINDA
Address: 2659 WEST GULF DRIVE #B-102
City-St-Zip: SANIBEL, FL 33957

Title: VP () Delete
Name: AULETTA, PATRICK
Address: 3100 TOPPING LANE
City-St-Zip: HUNTING VALLEY, OH 44022

Title: D () Delete
Name: BAYLY, ANNA
Address: 2659 WEST GULF DR #A301
City-St-Zip: SANIBEL, FL 33957

Title: S () Delete
Name: GRADY, MICHAEL
Address: 2659 WEST GULF DR #C101
City-St-Zip: SANIBEL, FL 33957

Title: T () Delete
Name: ROLLEY, DONALD
Address: 2659 WEST GULF DR #B201
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: P (X) Change () Addition
Name: BAYLY, ANNA
Address: 2659 WEST GULF DR #A301
City-St-Zip: SANIBEL, FL 33957

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: ROLLEY, DONALD
Address: 2659 WEST GULF DR #B201
City-St-Zip: SANIBEL, FL 33957

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: C. R. MIDDLETON

MGT

04/14/2009

Electronic Signature of Signing Officer or Director

Date