2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2011
Secretary of State

DOCUMENT# N01000000673

Entity Name: MUSTANG ISLAND HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

SANDCASTLE COMM. MGMT
1719 TRADE CENTER WAY 4
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

SANDCASTLE COMM. MGMT
1719 TRADE CENTER WAY 4
NAPLES, FL 34109

New Mailing Address:

FEI Number: 65-1083655 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LUTZ, TRAVOR
1719 TRADE CENTER WAY 4
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

LUTZ, TRAVOR
1719 TRADE CENTER WAY #4
NAPLES, FL 34109 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: STEPHANIEK@SANDCASTLECM.COM 03/31/2011
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VPD
Name: WHEELER, RUSSELL
Address: 1719 TRADE CENTER WAY #4
City-St-Zip: NAPLES, FL 34109

Title: STD
Name: OLSON, JOHN
Address: 1719 TRADE CENTER WAY #4
City-St-Zip: NAPLES, FL 34109

Title: D
Name: BRUNNACCINI, RICHARD
Address: 1719 TRADE CENTER WAY #4
City-St-Zip: NAPLES, FL 34109

Title: PD
Name: HILL, LEE
Address: 1719 TRADE CENTER WAY #4
City-St-Zip: NAPLES, FL 34109

Title: D
Name: STRICKLER, ROBERT
Address: 1719 TRADE CENTER WAY #4
City-St-Zip: NAPLES, FL 34109

I hereby 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 all other like empowered.

SIGNATURE: LEE HILL PD 03/31/2011
Electronic Signature of Signing Officer or Director Date