

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005639

FILED
Apr 24, 2009
Secretary of State

Entity Name: WHITE SAND VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

200 ESTERO BLVD
FORT MYERS BEACH, FL 33931

New Principal Place of Business:

Current Mailing Address:

275 ESTERO BLVD
FORT MYERS BEACH, FL 33931

New Mailing Address:

FEI Number: 34-1964790 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WAICHULIS, BILL
275 ESTERO BLVD
FORT MYERS BEACH, FL 33931 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: PD () Delete
Name: RICHTER, JULIETTE
Address: 1400 LANCASTER ST #704
City-St-Zip: BALTIMORE, MD 21234

Title: VP () Delete
Name: BEELEY, ROBERT A
Address: PO BOX 1327
City-St-Zip: TOMBALL, TX 77377

Title: ST () Delete
Name: VIEAU, MARK
Address: 5794 N. PIKE LAKE RD.
City-St-Zip: DULUTH, MN 55811

Title: D () Delete
Name: NOHRDEN, EULALIE
Address: 4687 MULBERRY WOODS CIRCLE
City-St-Zip: ANN ARBOR, MI 48105

Title: D () Delete
Name: HALPREN, EDWARD DR.
Address: 13891 BLENHEIM TRAIL
City-St-Zip: FORT MYERS, FL 33908

Title: AS () Delete
Name: SCARPATI, PEGGY
Address: 275 ESTERO BLVD
City-St-Zip: FORT MYERS BEACH, FL 33931

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: D (X) Change () Addition
Name: KIEVIT, KENNETH
Address: 70 ROSALIE AVENUE
City-St-Zip: CLIFTON, NJ 07011

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

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: PEGGY SCARPATI

AS

04/24/2009

Electronic Signature of Signing Officer or Director

_____ Date