


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2008 08:00 A
Secretary of State

DOCUMENT # N06962 1. Entity Name COLONNADES CONDOMINIUM ASSOCIATION OF SANIBEL, INC.	
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Principal Place of Business COLONY RESORT 419 E. GULF DR. SANIBEL, FL 33957-1015	Mailing Address COLONY RESORT 419 E. GULF DR. SANIBEL, FL 33957-1015
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DO NOT WRITE IN THIS SPACE



03302008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2051571	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent EVANS, LARRY W 419 EAST GULF DR. SANIBEL, FL 33957
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	000000883647 04/22/08-80062-017 30.63
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP STEEVES, DAN 635 LIDDLE LN CINCINNATI, OH 45215
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JACOB, ANDREW 750 LIDO BLVD. #56-B LIDO BEACH, NY 11561
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HARTMAN, RICHARD 665 REHOLDA WOODS CT KETTERINA, OH 45429
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HUNT, TERRY 214 YOLANDE AVE. W.E. JAMESTOWN, NY 14701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WILSON, SHELLEY 4003 N. HOLLY RIDGE CIR PEORIA, IL 61614
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: Larry W Evans 3/31/08 239-472-5751
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #