

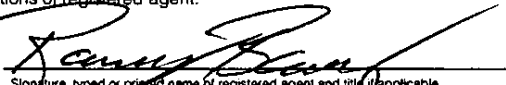


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2008 8:00 am
Secretary of State

04-10-2008 90017 026 ****61.25

DOCUMENT # N08250 1. Entity Name POINCIANA CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 2297 W. GULF DR. SANIBEL ISLAND, FL 33957				Mailing Address ISLAND MGMT P O BOX 100 SANIBEL ISLAND, FL 33957	
2. Principal Place of Business - No P.O. Box # 14970 CAPTIVA DR		3. Mailing Address Royal Shell			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. PO Box 189			
City & State CAPTIVA FL		City & State CAPTIVA FL			
Zip 33924	Country US	Zip 33924	Country US		
4. FEI Number 59-2646918				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 MACKESY, STEVEN J 711 TARPON BAY RD SANIBEL, FL 33957			7. Name and Address of New Registered Agent Name Royal Shell Property Mgmt. Street Address (P.O. Box Number is Not Acceptable) 1547 Periwinkle Way City Sanibel FL Zip Code 33957		
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  3-13-08 <small>Signature, typed or printed name of registered agent and title (if applicable). (NOTE: Registered Agent signature required when reinstating) DATE</small>					
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	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HANSEN, RICHARD 2297 WEST GULF DRIVE SANIBEL, FL 33957	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Hansen Richard 2297 West Gulf Dr 3B Sanibel FL 33957
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD VONROHR, JERRY 2297 WEST GULF DRIVE SANIBEL, FL 33957	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Redmond Kay 2297 West Gulf Dr 4C Sanibel FL 33957
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ENNIS, BETTY 2297 WEST GULF DRIVE SANIBEL, FL 33957	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ENNIS, RICHARD 2297 West Gulf Dr 2B Sanibel, FL 33957
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

