

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 23, 2009
Secretary of State**

DOCUMENT# N08289

Entity Name: ANCHOR POINTE COMMERCIAL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1633 PERIWINKLE WAY
SANIBEL, FL 33957

New Principal Place of Business:

1633 PERIWINKLE WAY
SUITE G
SANIBEL, FL 33957

Current Mailing Address:

1633 PERIWINKLE WAY
SANIBEL, FL 33957

New Mailing Address:

1633 PERIWINKLE WAY
SUITE G
SANIBEL, FL 33957

FEI Number: 59-2781355

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROGUSKA, BRENDA R
1633 PERIWINKLE WAY
SUITE G
SANIBEL, FL 33957 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: ROGUSKA, BRENDA
Address: 1633 PERIWINKLE WAY
City-St-Zip: SANIBEL, FL 33957

Title: STD () Delete
Name: MURTY, PATRICIA J
Address: 1633 PERIWINKLE WAY
City-St-Zip: SANIBEL, FL 33957

Title: T () Delete
Name: VASANTA, SENCERAT
Address: 1633 PERIWINKLE WAY, STE B
City-St-Zip: SANIBEL, FL 33957

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ROGUSKA, BRENDA
Address: 1633 PERIWINKLE WAY SUITE G
City-St-Zip: SANIBEL, FL 33957

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

Title: T (X) Change () Addition
Name: VASANTA, SENCERAT
Address: 1633 PERIWINKLE WAY, STE B
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: BRENDA R. ROGUSKA

PD

03/23/2009

Electronic Signature of Signing Officer or Director

Date