

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09918

FILED
Jan 08, 2009
Secretary of State

Entity Name: THE COLONY AT WIGGINS BAY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

670 WIGGINS BAY DR.
NAPLES, FL 34110 US

New Principal Place of Business:

Current Mailing Address:

670 WIGGINS BAY DR.
NAPLES, FL 34110 US

New Mailing Address:

FEI Number: 59-2592542

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRADBURY, JOHN
640 WIGGINS BAY DRIVE
NAPLES, FL 34110 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: BRADBURY, JOHN
Address: 640 WIGGINS BAY DR
City-St-Zip: NAPLES, FL 34110

Title: VP () Delete
Name: SORG, STEPHEN
Address: 628 WIGGINS BAY DRIVE
City-St-Zip: NAPLES, FL 34110

Title: D (X) Delete
Name: SLEIMAN, MICHAEL
Address: 634 WIGGINS BAY DR.
City-St-Zip: NAPLES, FL 34110

Title: DT () Delete
Name: BAUER, ROBERT
Address: 626 WIGGINS BAY DRIVE
City-St-Zip: NAPLES, FL 34110

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:

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: ROBERT BAUER

DT

01/08/2009

Electronic Signature of Signing Officer or Director

Date