2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2009
Secretary of State

DOCUMENT# N24206

Entity Name: CALOOSA SHORES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

5240 INDIAN CT
SANIBEL, FL 339571404 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 1003
SANIBEL, FL 339571404 US

New Mailing Address:

FEI Number: 65-0032395 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AFFOURTIT, RENE J
5240 INDIAN CT
SANIBEL, FL 339571404 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: DS ( ) Delete
Name: AFFOURTIT, RENE
Address: 5240 INDIAN CT
City-St-Zip: SANIBEL, FL

Title: TD ( ) Delete
Name: BRUMMER, JOHN G
Address: 5290 CALOOSA END LANE
City-St-Zip: SANIBEL, FL

Title: P ( ) Delete
Name: GIATTINI, MARC
Address: 5270 INDIAN CT
City-St-Zip: SANIBEL, FL

Title: VD ( ) Delete
Name: WARNER, PETER
Address: 5260 CALOOSA END LAND
City-St-Zip: SANIBEL, FL 33957

Title: D ( ) Delete
Name: HILGER, NANCY
Address: 5313 PUNTA CALOOSA CT
City-St-Zip: SANIBEL, FL 33957

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: ( ) 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: RENE J. AFFOURTIT MR. 02/04/2009

Electronic Signature of Signing Officer or Director — Date