

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31115

FILED
Apr 28, 2009
Secretary of State

Entity Name: THE SANCTUARY GOLF CLUB, INC.

Current Principal Place of Business:

2801 WULFERT ROAD
SANIBEL ISLAND, FL 33957

New Principal Place of Business:

Current Mailing Address:

2801 WULFERT ROAD
SANIBEL ISLAND, FL 33957

New Mailing Address:

FEI Number: 65-0111861

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ST JOHN, ANTHONY
2957 WULFERT ROAD
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: P () Delete
Name: RISCH, GERALD
Address: 2711 WULFERT ROAD
City-St-Zip: SANIBEL, FL 33957

Title: V () Delete
Name: CHRENC, ROBERT
Address: 2308 TROON COURT
City-St-Zip: SANIBEL, FL 33957

Title: T () Delete
Name: HALLIGAN, JOHN
Address: 2972 WULFERT ROAD
City-St-Zip: SANIBEL, FL 33957

Title: S () Delete
Name: ST JOHN, ANTHONY
Address: 2957 WULFERT ROAD
City-St-Zip: SANIBEL, FL 33957

Title: D () Delete
Name: NELSON, JAMES
Address: 635 EAST GULF DRIVE #A302
City-St-Zip: SANIBEL, FL 33957

Title: D () Delete
Name: CIRIELLO, BECKY
Address: 1460 MIDDLE GULF DRIVE
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: D (X) Change () Addition
Name: KETTEMAN, CHUCK
Address: 2343 WULFERT ROAD
City-St-Zip: SANIBEL, FL 33957

Title: D (X) Change () Addition
Name: SNELL, SHERIDAN
Address: 2963 WULFERT ROAD
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: JOHN HALLIGAN

T

04/28/2009

Electronic Signature of Signing Officer or Director

Date