2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2009
Secretary of State

DOCUMENT# N42875

Entity Name: TWELVE OAKS I CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

SANDCASTLE COMMUNITY MGMT
1719 TRADE CENTER WAY #4
NAPLES, FL 34109 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 8478
NAPLES, FL 341018478 US

New Mailing Address:

FEI Number: 65-0253990 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DE ARMAS, EDUARDO
SANDCASTLE COMMUNITY MANAGEMENT INC.
1719 TRADE CENTER WAY #4
NAPLES, FL 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: KELLER, JACE
Address: 8200 TWELVE OAKS CIRCLE #421
City-St-Zip: NAPLES, FL 34113

Title: TD ( ) Delete
Name: SHEAFFER, SYDNEY
Address: 8161 TWELVE OAKS CIR #514
City-St-Zip: NAPLES, FL 34113

Title: SD ( ) Delete
Name: BUSSINGER, HELENA
Address: 8274 TWELVE OAK CIR # 123
City-St-Zip: NAPLES, FL 34103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPTD (X) Change ( ) Addition
Name: OGURA, JAMES
Address: 8274 TWELVE OAKS CIR #111
City-St-Zip: NAPLES, FL 34113

Title: VPSD (X) Change ( ) Addition
Name: BUSSINGER, HELENA
Address: 8274 TWELVE OAK CIR # 123
City-St-Zip: NAPLES, FL 34113

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: HELENA BUSSINGER VPSD 04/14/2009

Electronic Signature of Signing Officer or Director — Date