2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9400000787

FILED Apr 03, 2009 Secretary of State

Entity Name: THE HERON AT THE SANCTUARY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O ISLAND MANAGEMENT GROUP

C/O ISLAND MANAGEMENT GROUP

P.O. BOX 100 711 TARPON BAY ROAD SANIBEL, FL 33957 US SANIBEL, FL 33957 US

Current Mailing Address: New Mailing Address:

C/O ISLAND MANAGEMENT GROUP P.O. BOX 100 SANIBEL, FL 33957 US

FEI Number: 65-0592678 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MACKESKY, ST EVEN J
711 TARPON BAY RD.
SANIBL, FL 33957 US

MACKESY, STEVEN J
711 TARPON BAY RD.
SANIBEL, FL 33957 US

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: STEVEN J MACKESY 04/03/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: () Change () Addition Name: OATEY, GARY Name:

 Name:
 OATET, GART
 Name:

 Address:
 5663 BALTOSROL CT 1B
 Address:

 City-St-Zip:
 SANIBEL, FL 33957
 City-St-Zip:

Title: VD () Delete Title: VD (X) Change () Addition Name: BROWN, STEVEN Name: BROWN, STEVEN

Address: 5657 BALTOSROL CT 2B Address: 5657 BALTUSROL CT 2B
City-St-Zip: SANIBEL, FL 33957 City-St-Zip: SANIBEL, FL 33957

Title: STD () Delete Title: SD (X) Change () Addition

 Name:
 ODLAUG, CATHERINE
 Name:
 ODLAUG, CATHERINE

 Address:
 5663 BALTOSROL CT 2A
 Address:
 5663 BALTOSROL CT 2A

 City-St-Zip:
 SANIBEL, FL 33957
 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: GARY OATEY PD 04/03/2009