

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N95000002571

**FILED**  
**Mar 11, 2010**  
**Secretary of State**

**Entity Name:** SANDCASTLE VILLAS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

9524 GULF SHORE DRIVE  
NAPLES, FL 34110

**New Principal Place of Business:**

**Current Mailing Address:**

2335 TAMIAMI TTR N  
STE 505  
NAPLES, FL 34103 US

**New Mailing Address:**

**FEI Number:** 59-3376636      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

GULFVIEW PROPERTY MGMT INC  
2335 TAMIAMI TRAIL N  
STE 505  
NAPLES, FL 34103 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: TD  
Name: KOHLMAN, IKE  
Address: 9524 GULF SHORE DR. # 6  
City-St-Zip: NAPLES, FL 34108

Title: PD  
Name: VELATINI, BONNIE  
Address: 10823 LONGSHORE WAY E  
City-St-Zip: NAPLES, FL 34119

Title: SD  
Name: KOHLMAN, BILLIE  
Address: 3941 N VILLAGE ROUN  
City-St-Zip: PARK CITY, UT 84060

I hereby 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 all other like empowered.

SIGNATURE: BONNIE VALENTI

PD

03/11/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date