

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004052

FILED  
Apr 14, 2009  
Secretary of State

**Entity Name:** HIDDEN SANCTUARY VILLAGE AT THE VERANDAS AT TIGER ISLAND CONDOMINIUM IV ASSOCIATION, INC.

**Current Principal Place of Business:**

834 BALD EAGLE DR  
MARCO ISLAND, FL 34145

**New Principal Place of Business:**

8065 TIGER COVE LANE  
NAPLES, FL 34113

**Current Mailing Address:**

834 BALD EAGLE DR  
SUITE 215  
MARCO ISLAND, FL 34145

**New Mailing Address:**

834 BALD EAGLE DR  
MARCO ISLAND, FL 34145

FEI Number: 65-1097619

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LEE, WILLIAM  
8075 TIGER COVE LANE  
# 1701  
NAPLES, FL 34113 US

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

ROSENOW, ROBERT  
834 BALD EAGLE DRIVE  
MARCO ISLAND, FL 34145 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: ROBERT ROSENOW

04/14/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: ST ( ) Delete  
Name: GRAFE, VOLKER  
Address: VILLESTRABE 12-14  
City-St-Zip: BRUEHL GERMANY, 50321

Title: VP ( ) Delete  
Name: CONKEL, JERRY  
Address: 6510 RIDPATH RD  
City-St-Zip: GROVE CITY, OH 43123

Title: P ( ) Delete  
Name: SOWDER, MANFORD  
Address: 7423 NEW YORK WAY  
City-St-Zip: DAYTON, OH 45414

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: S (X) Change ( ) Addition  
Name: ABBOTT, BONNIE  
Address: 130 WASHINGTON AVENUE  
City-St-Zip: HOLTSMVILLE, NY 11742

Title: P (X) Change ( ) Addition  
Name: WAHL, KENNETH  
Address: 8075 TIGER COVE LANE #1701  
City-St-Zip: NAPLES, FL 34113

Title: T (X) Change ( ) Addition  
Name: CAINE, CHARLES  
Address: P.O. BOX 1043468  
City-St-Zip: SIOUX FALLS, SD 57186

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: CHARLES CAINE

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04/14/2009

Electronic Signature of Signing Officer or Director

Date