

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

DOCUMENT# N98000007188

**FILED**  
**Jan 07, 2010**  
**Secretary of State**

**Entity Name:** SCIBC NORTH LAND CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1530 DOLPHIN STREET  
SUITE 4  
SARASOTA, FL 34236

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2879  
SARASOTA, FL 34230

**New Mailing Address:**

**FEI Number:** 65-0888856

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KLING, RENEE R  
1530 DOLPHIN STREET  
SUITE 4  
SARASOTA, FL 34236 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  
Name: TIMONEY, JOHN  
Address: P.O. BOX 91  
City-St-Zip: NOKOMIS, FL 34274

Title: STD  
Name: SMETTS, ROBERT  
Address: 101 POND CYPRESS RD  
City-St-Zip: VENICE, FL 34292

Title: VPD  
Name: BARRY, DORSEY  
Address: 351 SAND PINE BLVD.  
City-St-Zip: VENICE, FL 34292

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: RENEE RICHARDSON KLING

RA

01/07/2010

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

\_\_\_\_\_  
Date