## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 727991** 

REPORT FILED
Apr 15, 2009
Secretary of State

Entity Name: CARIBAY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:				New Principal Place of Business:			
C/O SEABOARD ARBORS MGMT SVC INC 2189 CLEVELAND ST STE 225 CLEARWATER, FL 33765				28100 U.S. HWY. 19 N 205 CLEARWATER, FL 33761			
Current Mailing Address:				New Mailing Address:			
C/O SEABOARD ARBORS MGMT SVC INC 2189 CLEVELAND ST STE 225 CLEARWATER, FL 33765 US				28100 U.S. HWY. 19 N 205 CLEARWATER, FL 33761			
FEI Number:	59-1790813	FEI Number Applied For ( )	FEI Nun	nber Not Appli	icable ( )	Certificate of Status D	esired ( )
Name and	Address of C	urrent Registered Agent:		Name and	Address of N	New Registered Age	ent:
LEIGHTON, LENNARD A C/O SEABOARD ARBORS MGMT SVC INC 2189 CLEVELAND ST STE 225 CLEARWATER, FL 33765 US				REINHARDT, DEBBIE C/O RESOURCE PROPERTY MANAGEMENT 28100 U.S. HWY. 19 N. STE. 205 CLEARWATER, FL 33761 US of changing its registered office or registered agent, or both,			
in the State		abilitis tills statement for the po	ii pose o	r changing ii	is registered t	nnce or registered ag	ent, or both,
SIGNATURE: DEBBIE REINHARDT						04/15/2009	
	Electroni	c Signature of Registered Ager	nt			Date	
OFFICERS	AND DIRECT	ORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD ()  FERRENTINO, D 2980 HAINES BA CLEARWATER,	AYSHORE # 130		Title: Name: Address: City-St-Zip:	( )	) Change()Addition	
Title: Name: Address: City-St-Zip:	SD () I WINNIE, SALLY 2980 HAINES BA CLEARWATER,			Title: Name: Address: City-St-Zip:	WINNIE, SALL	BAYSHORE #125	
Title: Name: Address: City-St-Zip:	D3 ( ) I MCGLONE, SUS 2980 HAINES BA CLEARWATER,	AYSHORE # 120		Title: Name: Address: City-St-Zip:	FAUL-MCGLON	BAYSHORE # 120	
Title: Name: Address: City-St-Zip:	TD () PERSHING, BRIA 2980 HAINES BA CLEARWATER,	YSHORE #105		Title: Name: Address: City-St-Zip:		) Change()Addition	
Title: Name: Address: City-St-Zip:	D () I BUFFUM, STEVE 2980 HAINES BA CLEARWATER,	AYSHORE #131		Title: Name: Address: City-St-Zip:	SHARMA, SAM	BAYSHORE #111	
Title: Name: Address: City-St-Zip:	D () I WESNER, SONY 2980 HAINES BA CLEARWATER,	YSHORE # 142		Title: Name: Address: City-St-Zip:	( )	) Change()Addition	

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:	DOROTHY FERRENTINO	DP	04/15/2009
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