

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743099

FILED
Jan 15, 2009
Secretary of State

Entity Name: COLONNADES MEMBERS INC.

Current Principal Place of Business:

1140 BAYSHORE DR
FT PIERCE, FL 34949

New Principal Place of Business:

Current Mailing Address:

1140 BAYSHORE DR
FT PIERCE, FL 34949

New Mailing Address:

FEI Number: 59-1831924

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORNETT, JANE L ESQ
CORNETT, GOOGE & ASSOCIATES P.A.
401 E. OSCEOLA STREET
STUART, FL 34994 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: 2VP () Delete
Name: GEORGE, BOB
Address: 1309 BAYSHORE DR#6
City-St-Zip: FORT PIERCE, FL 34949

Title: PD () Delete
Name: GUNTHER, GEORGE
Address: 1166 BAYSHORE DR #206
City-St-Zip: FORT PIERCE, FL 34949

Title: SD () Delete
Name: KRAFT, BEVERLY
Address: 1223 BAYSHORE DR.
City-St-Zip: FORT PIERCE, FL 34949

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BERCIER, RUSSELL
Address: 1223 BAYSHORE DR # 203
City-St-Zip: FORT PIERCE, FL 34949

Title: 1VPD (X) Change () Addition
Name: GUNTHER, GALE
Address: 1166 BAYSHORE DR # 206
City-St-Zip: FORT PIERCE, FL 34949

Title: 2VPD (X) Change () Addition
Name: HAGGBLAD, RICHARD
Address: 1351 BAYSHORE DR. # 203
City-St-Zip: FORT PIERCE, FL 34949

Title: T () Change (X) Addition
Name: O'BRIEN, DAN
Address: 1153 BAYSHORE DR #103
City-St-Zip: FORT PIERCE, FL 34949

Title: S () Change (X) Addition
Name: BARRY, DONNA
Address: 1315 BAYSHORE DR # 3
City-St-Zip: FORT PIERCE, FL 34949

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: RUSS BERCIER

PD

01/15/2009

Electronic Signature of Signing Officer or Director

Date