

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751552

FILED
Apr 30, 2009
Secretary of State

Entity Name: MADEIRA SOL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

13195 GULF LANE
MADEIRA BEACH, FL 33708 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 7696
ST. PETERSBURG, FL 33734 US

New Mailing Address:

FEI Number: 01-0671644 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARUSO, GERALD M AGENT
1430 56TH AVENUE NORTH
ST. PETERSBURG, FL 33703 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: PSD () Delete
Name: HAGEN, SANDRA
Address: 13195 GULF LANE #302
City-St-Zip: MADEIRA BEACH, FL 33708 US

Title: VD () Delete
Name: YORK, MIKE
Address: 15701 WILLOW DALE ROAD
City-St-Zip: TAMPA, FL 33625 US

Title: TD () Delete
Name: PETERSON, JOYCE
Address: 13195 GULF LANE # 402
City-St-Zip: MADEIRA BEACH, FL 33708 US

Title: D () Delete
Name: DEIDA, DAVID
Address: 6822 22ND AVENUE NORTH # 142
City-St-Zip: ST. PETERSBURG, FL 33710 US

Title: D () Delete
Name: ELLER, KEVIN
Address: 7050 SE 12TH CIRCLE
City-St-Zip: OCALA, FL 34480 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: HAGEN, SANDRA
Address: 13195 GULF LANE #302
City-St-Zip: MADEIRA BEACH, FL 33708 US

Title: V (X) Change () Addition
Name: YORK, MIKE
Address: 15701 WILLOWDALE ROAD
City-St-Zip: TAMPA, FL 33625 US

Title: T (X) Change () Addition
Name: PETERSON, JOYCE
Address: 13195 GULF LANE # 402
City-St-Zip: MADEIRA BEACH, FL 33708 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: GERALD M. CARUSO

AGT

04/30/2009

Electronic Signature of Signing Officer or Director

Date