

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754041

FILED
Feb 28, 2006
Secretary of State

Entity Name: FALCON BAY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4707 SE 5TH AVE., #202
CAPE CORAL, FL 33904 US

New Principal Place of Business:

4707 SE 5TH AVE., #101
CAPE CORAL, FL 33904 US

Current Mailing Address:

4707 SE 5TH AVE., #202
CAPE CORAL, FL 33904 US

New Mailing Address:

4707 SE 5TH AVE., #101
CAPE CORAL, FL 33904 US

FEI Number: 59-2249660

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUERBO, AUGUSTINE
4707 SE 5TH AVE., #202
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

ROWEN, SAMUEL F
4707 SE 5TH AVE., #101
CAPE CORAL, FL 33904 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: SAMUEL F. ROWEN

02/28/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CHERBO, AUGUSTINE
Address: 4704 SE 5TH AVE #202
City-St-Zip: CAPE CORAL, FL 33904

Title: VD () Delete
Name: ROWEN, SAM
Address: 4707 SE 5TH AVE., #101
City-St-Zip: CAPE CORAL, FL 33904 US

Title: SD () Delete
Name: OXFORD, LORETTA
Address: 4707 SE 5TH AVE., #103
City-St-Zip: CAPE CORAL, FL 33904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ROWEN, SAMUEL F
Address: 4707 SE 5TH AVE #101
City-St-Zip: CAPE CORAL, FL 33904

Title: VD (X) Change () Addition
Name: SANFORD, FLORENCE
Address: 4707 SE 5TH AVENUE, #202
City-St-Zip: CAPE CORAL, FL 33904 US

Title: SD (X) Change () Addition
Name: BUSCH, HANS
Address: 4707 SE 5TH AVE., #203
City-St-Zip: CAPE CORAL, FL 33904

I hereby certify that the information supplied with this filing does not qualify for the 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: SAMUEL F. ROWEN

PD

02/28/2006

Electronic Signature of Signing Officer or Director

Date