

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758649

FILED
Mar 05, 2009
Secretary of State

Entity Name: CLIPPER BAY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O SCHOO MANAGEMENT
12650 WHITEHALL DR
FORT MYERS, FL 33907 US

New Principal Place of Business:

9411 CYPRESS LAKE DRIVE
SUITE 2
FORT MYERS, FL 33919 US

Current Mailing Address:

9411 CYPRESS LAKE DR.
STE 2
FORT MYERS, FL 33919 US

New Mailing Address:

9411 CYPRESS LAKE DRIVE
SUITE 2
FORT MYERS, FL 33919 US

FEI Number: 59-2168289

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHOO, PATRICIA
C/O SCHOO MANAGEMENT
9411-2 CYPRESS LAKE DRIVE
FORT MYERS, FL 33919 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: P () Delete
Name: MARIANO, ANTHONY
Address: 4647 SE 17TH PL #306
City-St-Zip: CAPE CORAL, FL 33904

Title: VP () Delete
Name: HALBY, LYNN
Address: 4647 SE 17 PL #301
City-St-Zip: CAPE CORAL, FL 33904

Title: T () Delete
Name: SHARP, JIM
Address: 4719 SE 17 PL #305
City-St-Zip: CAPE CORAL, FL 33904

Title: S () Delete
Name: HUGHES, TERI
Address: 4719 SE 17TH PL #303
City-St-Zip: CAPE CORAL, FL 33904

Title: D () Delete
Name: SKIDELSKY, SHELLY
Address: 2225 SE 28 28 TERR
City-St-Zip: CAPE CORAL, FL 33904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: GRASSO, ANTHONY
Address: 4719 SE 17 PL #308
City-St-Zip: CAPE CORAL, FL 33904

Title: S (X) Change () Addition
Name: HOFFMAN, DALE
Address: 4719 SE 17TH PL #102
City-St-Zip: CAPE CORAL, FL 33904

Title: D (X) Change () Addition
Name: SKIDELSKY, SHELLY
Address: 2225 SE 28TH TERR
City-St-Zip: CAPE CORAL, FL 33904

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: ANTHONY MARIANO

P

03/05/2009

Electronic Signature of Signing Officer or Director

_____ Date