

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759770

FILED  
Mar 13, 2009  
Secretary of State

Entity Name: CARLOS POINTE BEACH CLUB ASSOCIATION, INC.

## Current Principal Place of Business:

6719 WINKLER RD  
#200  
FORT MYERS, FL 33919 US

## New Principal Place of Business:

## Current Mailing Address:

6719 WINKLER RD  
#200  
FORT MYERS, FL 33919 US

## New Mailing Address:

FEI Number: 59-2127344      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ALLIANT PROPERTY MGMT.  
6719 WINKLER RD #200  
FORT MYERS, FL 33919 US

## Name and Address of New Registered Agent:

ALLIANT PROPERTY MANAGEMENT  
6719 WINKLER RD  
SUITE 200  
FORT MYERS, FL 33919 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: JOHN M. STROHM, AGENT

03/13/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: ABEND, TOBY  
Address: 144 UPLAND AVE  
City-St-Zip: NEWTON HIGHLAND, MA 02161

Title: D ( ) Delete  
Name: BOSTWICK, JAMES II  
Address: 1520 OLD LANTEEN TRAIL  
City-St-Zip: FORT WAYNE, IN 46845

Title: SD ( ) Delete  
Name: CHIARCOS, IRMA  
Address: 4535 CONCESSION 8  
City-St-Zip: MAIDSTONE ON, NO NOR 1KO

Title: VP ( ) Delete  
Name: GALVANONI, ROEBRT  
Address: 719 S. KENNICOTT  
City-St-Zip: ARLINGTON HEIGHTS, IL 60005

Title: TD ( ) Delete  
Name: COWAN, JIM  
Address: 8350 ESTERO BLVD STE 311  
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: D ( ) Delete  
Name: CLIFTON, MIKE  
Address: 1520 OLD LANTERN TRAIL  
City-St-Zip: FORT WAYNE, IN 46845

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition  
Name: BOSTWICK, JAMES W  
Address: 1520 OLD LANTERN TRAIL  
City-St-Zip: FORT WAYNE, IN 46845

Title: SD (X) Change ( ) Addition  
Name: CHIARCOS, IRMA  
Address: 4535 CONCESSION 8, RR3  
City-St-Zip: MAIDSTONE, ON NOR 1KO

Title: VP (X) Change ( ) Addition  
Name: GALVANONI, ROBERT  
Address: 719 S. KENNICOTT  
City-St-Zip: ARLINGTON HEIGHTS, IL 60005

Title: TD (X) Change ( ) Addition  
Name: COWAN, JIM  
Address: 8350 ESTERO BLVD., # 311  
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: D (X) Change ( ) Addition  
Name: CLIFTON, MIKE  
Address: 2880 NE 14TH ST. #905  
City-St-Zip: POMPANO BEACH, FL 33062

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: TOBY ABEND

PD

03/13/2009

Electronic Signature of Signing Officer or Director

Date