

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005645

FILED
Mar 25, 2009
Secretary of State

Entity Name: STERLING LAKES II CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O ANCHOR ASSOCIATES
3940 RADIO RD #111
NAPLES, FL 34104

New Principal Place of Business:

Current Mailing Address:

C/O ANCHOR ASSOCIATES
3940 RADIO RD #111
NAPLES, FL 34104

New Mailing Address:

FEI Number: 59-3738256

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANCHOR ASSOCIATES
3940 RADIO RD #111
NAPLES, FL 34104 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: DS () Delete
Name: OWENS, DENNIS
Address: 6863 STERLING GREENS DR 101
City-St-Zip: NAPLES, FL 34104

Title: DP () Delete
Name: LIEFRIED, HELEN
Address: 6898 STERLING GREENS CT SUITE 101
City-St-Zip: NAPLES, FL 34104

Title: VPD () Delete
Name: CARDONE, FRANK
Address: 6846 STERLING GREENS DRIVE, #201
City-St-Zip: NAPLES, FL 34104

Title: D () Delete
Name: COLVIN, DEBRA
Address: 6878 STERLING GREENS COURT 101
City-St-Zip: NAPLES, FL 34104

Title: DT () Delete
Name: ABROSE, GERALD
Address: 6898 STERLING GREENS CT STE202
City-St-Zip: NAPLES, FL 34104

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVP (X) Change () Addition
Name: OWENS, DENNIS
Address: 6863 STERLING GREENS DR 101
City-St-Zip: NAPLES, FL 34104

Title: DP (X) Change () Addition
Name: CARDONE, FRANK
Address: 6846 STERLING GREENS DRIVE #201
City-St-Zip: NAPLES, FL 34104

Title: D (X) Change () Addition
Name: COLVIN, DEBRA
Address: 1251 OCEAN RD.
City-St-Zip: NARAGANSETT, RI 02882

Title: DS (X) Change () Addition
Name: DUCLOS, GAIL
Address: 6898 STERLING GREENS CT. #202
City-St-Zip: NAPLES, FL 34104

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: ROBERT NEIHEISEL

RA

03/25/2009

Electronic Signature of Signing Officer or Director

Date