

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007205

FILED
Apr 07, 2009
Secretary of State

Entity Name: THE CABRILLO CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

DEBORAH L. MARTOHUE ESQ.
2429 CENTRAL AVENUE, STE 203
ST. PETERSBURG, FL 33713

New Principal Place of Business:

50 LADOGA AVENUE
TAMPA, FL 33606

Current Mailing Address:

DEBORAH L. MARTOHUE ESQ.
2429 CENTRAL AVENUE, STE 203
ST. PETERSBURG, FL 33713

New Mailing Address:

50 LADOGA AVENUE
TAMPA, FL 33606

FEI Number: 02-0741028

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTOHUE, DEBORAH L ESQ
2429 CENTRAL AVE STE 203
ST. PETERSBURG, FL 33713 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: DP () Delete
Name: AGIA, SUSAN
Address: 50 LADOGA AVE.
City-St-Zip: TAMPA, FL 33606

Title: S,T () Delete
Name: AGIA, SUSAN
Address: 50 LADOGA AVENUE
City-St-Zip: TAMPA, FL 33606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: SUSAN AGIA

D,P

04/07/2009

Electronic Signature of Signing Officer or Director

_____ Date