

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 19, 2009
Secretary of State**

DOCUMENT# N05000002667

Entity Name: VILLA DEL MAR OF CLEARWATER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1860 N FORT HARRISON AVE
CLEARWATER, FL 33755

New Principal Place of Business:

2189 CLEVELAND STREET
#225
CLEARWATER, FL 33765

Current Mailing Address:

2189 CLEVELAND ST.
SUITE #225
CLEARWATER, FL 33765

New Mailing Address:

2189 CLEVELAND STREET
#225
CLEARWATER, FL 33765

FEI Number: 20-2621555 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEIGHTON, LENNARD A
2189 CLEVELAND STREET
#225
CLEARWATER, FL 33765 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: SZASZ, STEVE
Address: 1860 N FORT HARRISON AVE
City-St-Zip: CLEARWATER, FL 33755

Title: DST () Delete
Name: SZASZ, ROBERT
Address: 1860 N FORT HARRISON AVE
City-St-Zip: CLEARWATER, FL 33755

Title: D () Delete
Name: ADLER, LASZLO
Address: 1860 N FORT HARRISON AVE
City-St-Zip: CLEARWATER, FL 33755

Title: D (X) Delete
Name: SHIRLEY, RHONDA
Address: 1860 N. FORT HARRISON #303
City-St-Zip: CLEARWATER, FL 33755

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SHIRLEY, RHONDA
Address: 1860 N FORT HARRISON AVE #303
City-St-Zip: CLEARWATER, FL 33755

Title: STD (X) Change () Addition
Name: GELLER, PAT
Address: 1860 N FORT HARRISON AVE #402
City-St-Zip: CLEARWATER, FL 33755

Title: VPD (X) Change () Addition
Name: LUNDY, DAVE
Address: 1860 N FORT HARRISON AVE #105
City-St-Zip: CLEARWATER, FL 33755

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: RHONDA SHIRLEY

PD

01/19/2009

Electronic Signature of Signing Officer or Director

Date