

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738705

FILED
Jan 30, 2009
Secretary of State

Entity Name: MADEIRA NORTE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

13000 GULFBLVD
MADEIRA BEACH, FL 33708 US

New Principal Place of Business:

Current Mailing Address:

13000 GULF BLVD.
MADEIRA BEACH, FL 33708 US

New Mailing Address:

901 N HERCULES AVENUE
SUITE A
CLEARWATER, FL 33765 US

FEI Number: 59-1780207

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DITINNO, DENNIS
C/O LIBERTE MANAGEMENT
10681 GULF BLVD #207
TREASURE ISLAND, FL 33708 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: STRICKLAND, JIM
Address: 13000 GULF BLVD
City-St-Zip: MADEIRA BEACH, FL 33708

Title: D () Delete
Name: WILLIAMSON, BILL
Address: 13000 GULF BLVD #306
City-St-Zip: MADEIRA BEACH, FL 33708

Title: T () Delete
Name: MOUSLEY, WARREN
Address: 69 MAYFAIR AVENUE
City-St-Zip: DUNDAS, ON L9H 3

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: STRICKLAND, JIM
Address: 12 PHEASANT LANE
City-St-Zip: TORONTO, ONTARIO, CANADA, ON M9A 1T2

Title: VP (X) Change () Addition
Name: MINA, VIRGINIA
Address: 125 BARNES ROAD
City-St-Zip: WASHINGTONVILLE, NY 10992

Title: T (X) Change () Addition
Name: MOUSLEY, WARREN
Address: 69 MAYFAIR AVENUE
City-St-Zip: DUNDAS, ONTARIO, CANADA, ON L9H 3

Title: S () Change (X) Addition
Name: STANLEY, GERALD
Address: 10820 REECK ROAD
City-St-Zip: ALLEN PARK, MI 48101

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: RICHARD C. COMMONS

CPA

01/30/2009

Electronic Signature of Signing Officer or Director

Date