

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713290

FILED
Apr 20, 2009
Secretary of State

Entity Name: ALDEA MAR CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

KEYS-CALDWELL
1162 INDIAN HILLS BLVD
VENICE, FL 34293

New Principal Place of Business:

Current Mailing Address:

KEYS-CALDWELL
1162 INDIAN HILLS BLVD
VENICE, FL 34293

New Mailing Address:

FEI Number: 59-1511424

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEYS CALDWELL, INC
1162 INDIAN HILLS BLVD
VENICE, FL 34293 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: SD () Delete
Name: NOBLE, PETER
Address: 500 PARK BLVD, #84
City-St-Zip: VENICE, FL 34285

Title: TD () Delete
Name: MUSSER, LARRY
Address: 500 PARK BLVD S # 13
City-St-Zip: VENICE, FL 34285

Title: VD () Delete
Name: ROCHEFORD, RALPH
Address: 500 PARK BLVD S #67
City-St-Zip: VENICE, FL 34285

Title: PD () Delete
Name: HARTNETT, JOHN
Address: 500 PARK BLVD S # 122
City-St-Zip: VENICE, FL 34285

Title: D () Delete
Name: STAGER, JACKSON
Address: 500 PARK BLVD 26
City-St-Zip: VENICE, FL 34285

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: JOHN HARTNETT

PD

04/20/2009

Electronic Signature of Signing Officer or Director

Date