

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724025

FILED
Feb 03, 2009
Secretary of State

Entity Name: CONQUISTADOR CONDOMINIUM IV ASSOCIATION, INC.

Current Principal Place of Business:

1800 SOUTHEAST ST. LUCIE BOULEVARD
CLUBHOUSE
STUART, FL 34996

New Principal Place of Business:

Current Mailing Address:

1800 SOUTHEAST ST. LUCIE BOULEVARD
CLUBHOUSE
STUART, FL 34996

New Mailing Address:

FEI Number: 59-1470306

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LESLEY, FREDERICK
1800 SE ST. LUCIE BLVD
STUART, FL 34996 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: HAJEK, PATRICIA
Address: 1800 SE ST. LUCIE BLVD #4-208
City-St-Zip: STUART, FL 34996

Title: TD () Delete
Name: ROBINSON, RON
Address: 1800 SE ST LUCIE BLVD #4-302
City-St-Zip: STUART, FL 34996

Title: PD () Delete
Name: HAJEK, RICHARD
Address: 1800 SE ST. LUCIE BLVD., 4-208
City-St-Zip: STUART, FL 34996

Title: 1VPD () Delete
Name: MURRAY, THOMAS
Address: 1800 SE ST. LUCIE BLVD.
City-St-Zip: STUART, FL 34996

Title: 2VPD () Delete
Name: POE, RICHARD
Address: 1800 SE ST. LUCIE BLVD., 4-102
City-St-Zip: STUART, FL 34996

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: 1VPD (X) Change () Addition
Name: HAGGETT, PATRICIA
Address: 1800 SE ST. LUCIE BLVD.
City-St-Zip: STUART, FL 34996

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: RICHARD HAJEK

PD

02/03/2009

Electronic Signature of Signing Officer or Director

Date