

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 724025

**FILED**  
**Jan 04, 2010**  
**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  
Name: CLOSE, SHIRLEY  
Address: 1800 SE ST.LUCIE BLVD #4-204  
City-St-Zip: STUART, FL 34996

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

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

Title: 1VPD  
Name: HAGGETT, PATRICIA  
Address: 1800 SE ST. LUCIE BLVD.  
City-St-Zip: STUART, FL 34996

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

I hereby 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 all other like empowered.

SIGNATURE: RICHARD HAJEK

P

01/04/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date