## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 724025**

FILED Jan 03, <u>201</u>1 Secretary of State

Entity Name: CONQUISTADOR CONDOMINIUM IV ASSOCIATION, INC.

**Current Principal Place of Business:** 

1800 SOUTHEAST ST.LUCIE BOULEVARD

CLUBHOUSE

STUART, FL 34996

**Current Mailing Address:** 

1800 SOUTHEAST ST.LUCIE BOULEVARD CLUBHOUSE

STUART, FL 34996

FEI Number: 59-1470306 FEI Number Applied For ( ) FEI Number Not Applicable ( )

CLUBHOUSE

CLUBHOUSE

STUART, FL 34996

STUART, FL 34996

New Mailing Address:

**New Principal Place of Business:** 

1800 SE ST.LUCIE BOULEVARD

1800 SE ST.LUCIE BOULEVARD

Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LESLEY, FREDERICK 1800 SE ST. LUCIE BLVD STUART, FL 34996

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:**

CLOSE, SHIRLEY Name: Address: 1800 SE ST.LUCIE BLVD City-St-Zip: STUART, FL 34996

Title: TD

Name: ROBINSON, RON Address: 1800 SE ST LUCIE BLVD City-St-Zip: STUART, FL 34996

Title: PD

POE, RICHARD Name:

1800 SE ST. LUCIE BLVD. Address: City-St-Zip: STUART, FL 34996

Title: 1VPD

Name: HAGGETT, PATRICIA Address: 1800 SE ST. LUCIE BLVD.

City-St-Zip: STUART, FL 34996

2VPD Title:

NICHOLS, LEONARD Name: 1800 SE ST. LUCIE BLVD. Address: 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 POE PD 01/03/2011