

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725014

FILED  
Jan 06, 2009  
Secretary of State

Entity Name: CONQUISTADOR CONDOMINIUM VII ASSOC. INC.

## Current Principal Place of Business:

1800 S.E.ST. LUCIE BOULEVARD  
STUART, FL 34996

## New Principal Place of Business:

1800 S.E.ST. LUCIE BLVD  
CLUBHOUSE  
STUART, FL 34996

## Current Mailing Address:

1800 S.E.ST. LUCIE BOULEVARD  
STUART, FL 34996

## New Mailing Address:

1800 S.E.ST. LUCIE BLVD  
CLUBHOUSE  
STUART, FL 34996

FEI Number: 59-1545835

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FREDERICK, LESLEY  
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: TD ( ) Delete  
Name: STEGEMILLER, GEORGE  
Address: 1800 SE ST. LUCIE BLVD. #7-207  
City-St-Zip: STUART, FL 34996

Title: 1VPD ( ) Delete  
Name: O'HANLEY, JOHN  
Address: 1800 SE ST. LUCIE BLVD 7-307  
City-St-Zip: STUART, FL 34996

Title: PD ( ) Delete  
Name: KOVACS, PHYLLIS  
Address: 1800 SE ST LUCIE BLVD  
City-St-Zip: STUART, FL 34996

Title: 2VPD ( ) Delete  
Name: KEENAN, DANIEL  
Address: 1800 SE ST. LUCIE BLVD 7-104  
City-St-Zip: STUART, FL 34996

Title: SD ( ) Delete  
Name: FRANCES, FABIANO  
Address: 1800 SE ST LUCIE BLVD  
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: ( ) 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: PHYLLIS KOVACS

PD

01/06/2009

Electronic Signature of Signing Officer or Director

Date