

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725472

FILED
Jan 26, 2009
Secretary of State

Entity Name: COLONNADES CONDOMINIUM ASSOCIATION NO 7 INC

Current Principal Place of Business:

1140 BAYSHORE DR.
FT. PIERCE, FL 34949

New Principal Place of Business:

Current Mailing Address:

1140 BAYSHORE DR.
FT. PIERCE, FL 34949

New Mailing Address:

FEI Number: 59-1579478

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WRATHER, FRED H PRES.
1172 COMMODORE CT. #206
FT. PIERCE, FL 34949 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: D () Delete
Name: LANGE, TED,
Address: 1172 COMMODORE CT. NO 204
City-St-Zip: FORT PIERCE, FL 34949

Title: VP/D () Delete
Name: KLEIN, MARGARET---PR, ESIDENT
Address: 1151 CARLTON CT NO.101
City-St-Zip: FORT PIERCE, FL 34949

Title: TD () Delete
Name: VOSS, DYANA BOYD
Address: 323 LEEWARD LANE #202
City-St-Zip: FORT PIERCE, FL 349493032

Title: S/D () Delete
Name: HAVEY, MARY LYNNE---, --SECRETARY
Address: 1172 COMMODORE CT NO201
City-St-Zip: FORT PIERCE, FL 34949

Title: D () Delete
Name: SCHUMAN, BOB-----DIR, ECTOR
Address: 323 LEEWARD LANE NO. 205
City-St-Zip: FT PIERCE, FL 34949

Title: D () Delete
Name: HAREN, RONALD-----DI, RECTOR
Address: 323 LEEWARD LANE NO. 105
City-St-Zip: FT PIERCE, FL 34949

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: FRED H. WRATHER

PRES

01/26/2009

Electronic Signature of Signing Officer or Director

Date