2006 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT #725656

Entity Name

EL CONQUISTADOR, VILLAGE 1, SECTION 1



BRADENTON, FL 34210 US		SARASOTA, FL 34243		
2. Principal Place of Business		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		
City & State		City & State		
Zip	Country	Zip	Country	
6	. Name and Address of Cu	rrent Registered Agent		
DELLCOR MANAGEMENT, INC				

FILED Apr 24, 2006 8:00 am Secretary of State 04-24-2006 90353 038 ****61.25

CONDOMINIUM ASSOCIATION, INC.						
Principal Place of Business 6120-24 43RD ST. W. BRADENTON, FL 34210 US Address SARASOTA, FL 34243	60029337					
2. Principal Place of Business 3. Mailing Address						
2. Principal Place of Business 3. Mailing Address						
Suite, Apt. #, etc. Suite, Apt. #, etc. 04032006 Chg-NP CR2E037	7 (11/05)					
City & State City & State 4. FEI Number 59-3184963	Applied Fo					
	8.75 Additional ee Required					
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 7. Name 2. Nam	gent					
DELLCOR MANAGEMENT, INC.	Name					
310 PEARL AVENUE Street Address (P.O. Box Number is Not Acceptable) SARASOTA, FL 34243	Street Address (P.O. Box Number is Not Acceptable)					
City	Zip Code					
8. 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. I am familiar with, and accept the obligations of registered agent.						
SIGNATURE Signature, typed or printed name of registered agent and title # applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
Filing Fee Is \$61.25 Due by May 1, 2006 9. Election Campaign Financing Trust Fund Contribution. Added to Fees South Make check Florida Department						
10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	ECTORS IN 10					
TITLE PD DP Delete TITLE NAME CONLON, MARTY	☐ Change ☐ Addi	dition				
STREET ADDRESS 6124-43 ST W # A202 STREET ADDRESS						
CITY-ST-ZIP BRADENTON, FL 34210 CITY-ST-ZIP						
FULLED DEFENDANCE	Change Addi	fition				
NAME FULMER, BETTY JO NAME STREET ADDRESS 6120 - 43 ST. W. STREET ADDRESS 5						
CITY-ST-ZIP BRADENTON, FL 34210		ļ				
TITLE D E Delete TITLE	☐ Change ☐ Addi	dition				
NAME ZAK, CHESTER NAME						
STREET ADDRESS 6124 43RD ST W STREET ADDRESS STREET ADDRESS STREET ADDRESS						
CITY-ST-ZIP BRADENTON, FL 34210 CITY-ST-ZIP TITLE Delete TITLE PD	☐ Change ☐ Addi					
NAME SACK POPLAR	Change Addi	MION				
STREET ADDRESS CITY-ST-71P CITY-ST-71P CITY-ST-71P						
CITY-ST-ZIP BRADENTON, FL 34210						
	Change Addi	ition				
NAME DAVID LEDWARDS STREET ADDRESS 6124 43 STW # B101						
CITY-ST-ZIP BEACENTON, FL 34210						
TITLE Delete TITLE D	Change PAddi	dition				
NAME DICK EVANS		·				
STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP BEADENTON, FL 34210						
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that						

of the corporation or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

941-358-