

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90343 046 ****75.00

DOCUMENT # 727065

1. Entity Name
CORTEZ VILLAS CONDOMINIUM 1 ASSOCIATION, INC.



Principal Place of Business
4204 37TH AVE DR W.
BRADENTON, FL 34205 US

Mailing Address
4204 37TH AVE DR W.
BRADENTON, FL 34205 US

40049523



01142006 No Chg-NP CR2E037 (11/05)

4. FEI Number
59-6526573

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MILLIGAN, JACK
4210 37TH AVE. DR. W.
BRADENTON, FL 34205

**DO NOT WRITE
IN THIS SPACE**

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: Jack A. Milligan

Signature, typed or printed name of registered agent and title if applicable

(NO E: Registered Agent signature required when reinstating)

DATE

4/6/06

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☒

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE P
NAME SWAN, JACK
STREET ADDRESS 4204 37TH AVE DR W.
CITY-ST-ZIP BRADENTON, FL 34205

TITLE TD
NAME WERTHEIM, CAROL
STREET ADDRESS 4205 36TH AVENUE DRIVE W
CITY-ST-ZIP BRADENTON, FL 34205

TITLE SD
NAME ADAMS, ALMA
STREET ADDRESS 4206 36TH AVE DR W.
CITY-ST-ZIP BRADENTON, FL 34205

TITLE VD
NAME SMITH, PETER
STREET ADDRESS 4212 36TH AVE DR W.
CITY-ST-ZIP BRADENTON, FL 34205

GOINS, JAY
4202-1/2 37th AVE. DR. W
Same

TITLE D
NAME MILLIGAN, JACK
STREET ADDRESS 4210 37TH AVE. DR. WEST
CITY-ST-ZIP BRADENTON, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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 the information indicated on this report or supplemental report is true and accurate and that my 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 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

Date

Daytime Phone #

CAROL M. WERTHEIM

3/29/06 941-739-0988