2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2007 8:00 am
Secretary of State
04-19-2007 90194 011 ****61.25

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

40069516

01312007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-6526573 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MILLIGAN, JACK 4210 37TH AVE. DR. W. BRADENTON, FL 34205	Name PETER SMITH Street Address (P.O. Box Number is Not Acceptable) 4212 36TH AVE. DR. W City BRADENTON FL Zip Code 34205

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 PETER SMITH Peter Smith 4/17/2007
Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	P ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	SWAN, JACK	NAME	
STREET ADDRESS	4204 37TH AVE DR W.	STREET ADDRESS	
CITY-ST-ZIP	BRADENTON, FL 34205	CITY-ST-ZIP	
TITLE	TD ☒ Delete	TITLE	TD ☐ Change ☒ Addition
NAME	WERTHEIM, CAROL	NAME	SMITH, PETER
STREET ADDRESS	4205 36TH AVENUE DRIVE W	STREET ADDRESS	4212 36TH AVENUE DRIVE W
CITY-ST-ZIP	BRADENTON, FL 34205	CITY-ST-ZIP	BRADENTON, FL. 34205
TITLE	SD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	ADAMS, ALMA	NAME	
STREET ADDRESS	4206 36TH AVE DR W.	STREET ADDRESS	
CITY-ST-ZIP	BRADENTON, FL 34205	CITY-ST-ZIP	
TITLE	VD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	GOINS, JAY	NAME	
STREET ADDRESS	4202 37TH AVE DR WEST	STREET ADDRESS	
CITY-ST-ZIP	BRADENTON, FL 34205	CITY-ST-ZIP	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	MILLIGAN, JACK	NAME	
STREET ADDRESS	4210 37TH AVE. DR. WEST	STREET ADDRESS	
CITY-ST-ZIP	BRADENTON, FL	CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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: Peter Smith PETER SMITH 4/17/2007
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #