

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727391

FILED
Feb 13, 2009
Secretary of State

Entity Name: LAUREL VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

612 BIRD BAY DRIVE, S.
VENICE, FL 34292

New Principal Place of Business:

612 BIRD BAY DRIVE, S.
VENICE, FL 34285

Current Mailing Address:

612 BIRD BAY DRIVE, S.
VENICE, FL 34292

New Mailing Address:

612 BIRD BAY DRIVE, S.
VENICE, FL 34285

FEI Number: 59-1575244

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CIPPONERI, MARSHA
612 BIRD BAY DR. S.
VENICE, FL 34285 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: PENDERGAST, LOIS
Address: 612 BIRD BAY DR. SOUTH
City-St-Zip: VENICE, FL 34285

Title: PD () Delete
Name: JEAN, TOM
Address: 612 BIRD BAY DR. S.
City-St-Zip: VENICE, FL 34285

Title: VPD () Delete
Name: GALLAGHER, JACK
Address: 612 BIRD BAY DR. S.
City-St-Zip: VENICE, FL 34285

Title: SD (X) Delete
Name: RILEY, RON
Address: 612 BIRD BAY DR. S.
City-St-Zip: VENICE, FL 34285

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD/S (X) Change () Addition
Name: PENDERGAST, LOIS
Address: 612 BIRD BAY DR. SOUTH
City-St-Zip: VENICE, FL 34285

Title: VP (X) Change () Addition
Name: JEAN, TOM
Address: 612 BIRD BAY DR. S.
City-St-Zip: VENICE, FL 34285

Title: PRES (X) Change () Addition
Name: GALLAGHER, JACK
Address: 612 BIRD BAY DR. S.
City-St-Zip: VENICE, FL 34285

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: MARSHA CIPPONERI

RA

02/13/2009

Electronic Signature of Signing Officer or Director

Date