

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728482

FILED
Jan 03, 2012
Secretary of State

Entity Name: FLEUR DE LIS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1005 KNOX MCRAE DR
TITUSVILLE, FL 32780

New Principal Place of Business:

Current Mailing Address:

PO BOX 2133
TITUSVILLE, FL 327812133 US

New Mailing Address:

FEI Number: 59-1542109

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORRIS, CATHRYN L
3575 LIONEL RD
MIMS, FL 32754 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: PD
Name: MORRIS, CATHRYN L
Address: 3575 LIONEL RD
City-St-Zip: MIMS, FL 32754 US

Title: SD
Name: SALASEK, LAWRENCE J
Address: 1005 KNOX MCRAE DR, #101
City-St-Zip: TITUSVILLE, FL 32780 US

Title: TD
Name: MCQUIN, BRUNI
Address: 1005 KNOX MCRAE DR, # 208
City-St-Zip: TITUSVILLE, FL 32780 US

Title: D
Name: CUFF, THOMAS
Address: 1005 KNOX MCRAE DR, #113
City-St-Zip: TITUSVILLE, FL 32780 US

I hereby 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 all other like empowered.

SIGNATURE: LAWRENCE J. SALASEK

SEC

01/03/2012

Electronic Signature of Signing Officer or Director

Date