## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#729718**

FILED Apr 27, 2009 Secretary of State

Entity Name: CORTEZ VILLAS CONDOMINIUM 3 ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 4109 35TH AVE W 4103 35TH AVE W BRADENTON, FL 34205 BRADENTON, FL 34205 US US **Current Mailing Address: New Mailing Address:** 4109 35TH AVE W 4103 35TH AVE W BRADENTON, FL 34205 US BRADENTON, FL 34205 US FEI Number: 59-1525892 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SCHRECKENGOST, KATHY 4103 35TH AVENUE WEST BRADENTON, FL 34205 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete SCHRECKENGOST, KATHY Name: Name: 4103 35TH AVENUE Address: Address: City-St-Zip: BRADENTON, FL 34205 City-St-Zip: Title: () Delete Title: () Change () Addition RANDOLPH, FRANK Name: Name: Address: 3401 41ST ST W Address: City-St-Zip: BRADENTON, FL 34205 City-St-Zip: Title: () Delete Title: STD (X) Change ( ) Addition TEATES, BOB TEATES, SHEILA Name: Name: 3403 41ST STREET WEST Address: 3403 41ST STREET WEST Address: City-St-Zip: APO, AA 34025 City-St-Zip: BRADENTON, FL 34025 Title: VTD ( ) Delete Title: VPD (X) Change ( ) Addition Name: TEATES, SHEILA Name: MORITZ, CLANCY 3403 41ST STREET WEST 4109 35TH AVENUE WEST Address: Address: City-St-Zip: BRADENTON, FL 34205 City-St-Zip: BRADENTON, FL 34205 Title: () Delete Title: (X) Change ( ) Addition MORITZ, CLANCY RIO, CLANCY Name: Name: 4109 35TH AVE W 41049 35TH AVE W Address: Address: BRADENTON, FL 34205 City-St-Zip: City-St-Zip: BRADENTON, FL 34205

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: KATHY SCHRECKENGOST PD 04/27/2009