

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2009
Secretary of State

DOCUMENT# 731215

Entity Name: CALOOSA BAYVIEW CONDOMINIUM PHASE B ASSOCIATION, INCORPORATED.

Current Principal Place of Business:

BRAID ASSOCIATION MANAGEMENT
4489 WINDJAMMER LANE
FORT MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

BRAID ASSOCIATION MANAGEMENT
4489 WINDJAMMER LANE
FORT MYERS, FL 33919

New Mailing Address:

FEI Number: 54-1068731 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRAID, EDWARD
BRAID ASSOCIATION MANAGEMENT
4489 WINDJAMMER LANE
FORT MYERS, FL 33919 US

Name and Address of New Registered Agent:

BRAID ASSOCIATION MANAGEMENT
4489 WINDJAMMER LANE
FORT MYERS, FL 33919 US

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: EDWARD S. BRAID

03/02/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: BETTER, GLEN
Address: 4305 D ISLAND CIR
City-St-Zip: FORT MYERS, FL 33919

Title: PD () Delete
Name: CURD, DELORES
Address: 4257-C ISLAND CIRCLE
City-St-Zip: FORT MYERS, FL 33919

Title: VPD () Delete
Name: MULRUY, THERESA
Address: 4255 A ISLAND CIR
City-St-Zip: FORT MYERS, FL 33919

Title: D () Delete
Name: NERENBERG, MARK
Address: 4259 E ISLAND CIR
City-St-Zip: FORT MYERS, FL 33919

Title: D (X) Delete
Name: CAMP, MARY
Address: 4263 B ISLAND CIR
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: VETTER, GLEN
Address: 4303 - D ISLAND CIR
City-St-Zip: FORT MYERS, FL 33919

Title: VPD (X) Change () Addition
Name: CORD, DELORES
Address: 4257-C ISLAND CIRCLE
City-St-Zip: FORT MYERS, FL 33919

Title: TD (X) Change () Addition
Name: CAMP, MARY
Address: 4263 - A ISLAND CIR
City-St-Zip: FORT MYERS, FL 33919

Title: S-D (X) Change () Addition
Name: GRISSE, ERIN
Address: 863 N. ENTRADA DR.
City-St-Zip: FORT MYERS, FL 33919

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: GLEN VETTER

P

03/02/2009

Electronic Signature of Signing Officer or Director

Date