

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739094

FILED
Jan 22, 2009
Secretary of State

Entity Name: ADVENTURA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

975 MARIGOLD LANE
VERO BCH, FL 32963

New Principal Place of Business:

Current Mailing Address:

975 MARIGOLD LANE
3
VERO BCH, FL 32963

New Mailing Address:

FEI Number: 59-2396008

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCHUGH, NEAL A
975 MARIGOLD LN
3
VERO BEACH, FL 32963 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: D () Delete
Name: MAYS, MARY BARBARA
Address: P.O. BOX 643955
City-St-Zip: VERO BEACH, FL 32964

Title: DPT () Delete
Name: MCHUGH, NEAL A
Address: 975 MARIGOLD LN # 3
City-St-Zip: VERO BEACH, FL 32963

Title: D () Delete
Name: BRYANT, WILLIAM
Address: 101 YUMA TRAIL
City-St-Zip: GREENSBURG, IN 47240

Title: DS () Delete
Name: VIRGILIO, RON OR LANA
Address: 69 SHELLY ST
City-St-Zip: ERIAL, NJ 08081

Title: D () Delete
Name: MCHUGH, JAMES A
Address: 4901 88TH ST EAST
City-St-Zip: BRADENTON, FL 34211

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: NEAL A. MCHUGH

DPT

01/22/2009

Electronic Signature of Signing Officer or Director

Date