

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739414

FILED
Apr 26, 2011
Secretary of State

Entity Name: CORAL DEL RIO II CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O AMERICAN CONDO MGMT
615 CAPE CORAL PKWY WEST SUITE 103
CAPE CORAL, FL 33914

New Principal Place of Business:

Current Mailing Address:

C/O AMERICAN CONDO MGMT, INC.
PO BOX 100399
CAPE CORAL, FL 33904 US

New Mailing Address:

FEI Number: 59-1743368 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

KASE, SUSAN
615 CAPE CORAL PKWY WEST
SUITE 103
CAPE CORAL, FL 33914 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: S
Name: MICHAELS, GEOFFREY
Address: 4104 SE 18TH AVE #2D
City-St-Zip: CAPE CORAL, FL 33904

Title: VP
Name: JENNINGS, BETTY
Address: 442 SUNRISE DR
City-St-Zip: KENT, OH 44240

Title: D
Name: BELEW, BILL
Address: 4104 SE 18TH AVE #2A
City-St-Zip: CAPE CORAL, FL 33904

Title: T
Name: FEATHER, WALLACE
Address: 1807 SE 41ST ST, @2I
City-St-Zip: CAPE CORAL, FL 33904

Title: P
Name: DAVENPORT, DONALD
Address: 1807 SE 41ST ST, #1H
City-St-Zip: CAPE CORAL, FL 33904

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: DONALD DAVENPORT

PRES

04/26/2011

Electronic Signature of Signing Officer or Director

Date