

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741204

FILED
Apr 22, 2010
Secretary of State

Entity Name: EL RIO CONDOMINIUM BUILDING NO. 8, INC.

Current Principal Place of Business:

C/O AMERICAN CONDO MGMT
615 CAPE CORAL PARKWAY W #103
CAPE CORAL, FL 33914 US

New Principal Place of Business:

Current Mailing Address:

C/O AMERICAN CONDO MGMT
PO BOX 100399
CAPE CORAL, FL 33910 US

New Mailing Address:

FEI Number: 59-2361387

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KASE, SUSAN M
615 CAPE CORAL PARKWAY W
#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: P
Name: FLOYD, KENNEL
Address: 4840 GOLF CLUB CT. #10
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: D
Name: LEWIS, LISA
Address: 4840 GOLF CLUB DR., APT. 1
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: S
Name: ADAMS, PATRICIA
Address: 4840 GOLF CLUB CT. #11
City-St-Zip: NORTH FORT MYERS, FL 33903 US

Title: VP
Name: COLCORD, ESTHER
Address: 4840 GOLF CLUB CT., #12
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: D
Name: PARRICH, DORIS
Address: 4840 GOLF CLUB CT # 4D
City-St-Zip: FORT MYERS, FL 33903 US

Title: T
Name: COLCORD, ESTHER
Address: 4840 GOLF CLUB CT., #12
City-St-Zip: NORTH FORT MYERS, FL 33903

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: FLOYD KENNEL

P

04/22/2010

Electronic Signature of Signing Officer or Director

Date