

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741223

FILED
Mar 19, 2009
Secretary of State

Entity Name: CASTAWAYS CONDOMINIUMS ASSOCIATION, INC.

Current Principal Place of Business:

2240 NORTH BEACH RD.
ENGLEWOOD, FL 34223

New Principal Place of Business:

Current Mailing Address:

2240 NORTH BEACH RD.
ENGLEWOOD, FL 34223

New Mailing Address:

FEI Number: 59-1796713

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREY, CHERI L
5125 LATHAM TERR
PORT CHARLOTTE, FL 33981 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 () Delete
Name: CORSINI, ROBERT
Address: 12 WATERVIEW LANE
City-St-Zip: PROVIDENCE, RI 02904

Title: S () Delete
Name: ZENERE, COLLEEN
Address: 10548 YANKEE RIDGE DR.
City-St-Zip: FRANKFORT, IL 60423

Title: VT () Delete
Name: EASTON, GARY
Address: 2671 MILLVILLE RD
City-St-Zip: LAPEER, MI 48446

Title: D () Delete
Name: SCHWIETZ, JOSEPH
Address: 6561 N. SHORE TRAIL
City-St-Zip: FOREST LAKE, MN 55025

Title: MGR () Delete
Name: FREY, CHERI L
Address: 5125 LATHAM TERR
City-St-Zip: PORT CHARLOTTE, FL 33981

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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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: CHERI L FREY

MS

03/19/2009

Electronic Signature of Signing Officer or Director

Date