

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743101

FILED  
Jan 17, 2009  
Secretary of State

Entity Name: TIKI HOUSE CONDOMINIUM, INC.

## Current Principal Place of Business:

904 PANAMA COURT  
UNIT #1  
MARCO ISLAND, FL 34145

## New Principal Place of Business:

## Current Mailing Address:

994 PANAMA COURT  
UNIT #1  
MARCO ISLAND, FL 34145

## New Mailing Address:

904 PANAMA COURT  
UNIT #1  
MARCO ISLAND, FL 34145

FEI Number: 59-1875551

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MORRIS, WILLIAM G ESQ  
247 N COLLIER BLVD  
202  
MARCO ISLAND, FL 34145 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: PD ( ) Delete  
Name: BUCHANAN, WILSON F  
Address: 904 PANAMA COURT #1  
City-St-Zip: MARCO ISLAND, FL 34145

Title: STD ( ) Delete  
Name: BUCHANAN, KATHERINE A  
Address: 25574 ARROWHEAD DRIVE  
City-St-Zip: MUNDELEIN, IL 60060

Title: D ( ) Delete  
Name: CADOTTE, ELIZABETH  
Address: 904 PANAMA COURT #2  
City-St-Zip: MARCO ISLAND, FL 34145

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: FLINN, STEVEN  
Address: 19772 SIOUX HILLS ROAD  
City-St-Zip: HUTCHINSON, MN 55350

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: STEVEN FLINN

PD

01/17/2009

Electronic Signature of Signing Officer or Director

Date