

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743931

FILED
Mar 06, 2006
Secretary of State

Entity Name: THE COLONIES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2180 W STATE RD 434 STE 5000
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

2180 W STATE RD 434 STE 5000
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 59-1851046

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR
SENTRY MANAGEMENT, INC.
2180 W. STATE RD. 434, SUITE 5000
LONGWOOD, FL 32779 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: BOUND, AHLONA
Address: 3027 AARON BURR AVE
City-St-Zip: WINTER PARK, FL 32792

Title: VPD () Delete
Name: RICHARDSON, DALE
Address: 130 KOVE BLVD
City-St-Zip: OSTEEN, FL 32764

Title: SD () Delete
Name: BENTON, LINDA
Address: 7340B DANIEL WEBSTER DR
City-St-Zip: WINTER PARK, FL 32792

Title: TD () Delete
Name: DUSSEAU, MICHELLE
Address: 3015C AARON BURR AVE
City-St-Zip: WINTER PARK, FL 32792

Title: D () Delete
Name: SANDLER, ED
Address: 1272 WINDHAM PINE DR
City-St-Zip: APOPKA, FL 32712

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 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: AHLONA BOUND

PD

03/06/2006

Electronic Signature of Signing Officer or Director

Date