

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743931

FILED
Apr 02, 2009
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:

HART, JAMES W JR
SENTRY MANAGEMENT, INC.
2180 WEST SR 434 SUITE 5000
LONGWOOD, FL 32779 US

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: JAMES W HART JR

04/02/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BOUNDS, AHLONA
Address: 3027 AARON BURR AVE
City-St-Zip: WINTER PARK, FL 32792

Title: TD () Delete
Name: MARSHALL, RODNEY
Address: 658 MURPHY RD
City-St-Zip: WINTER SPRINGS, FL 32708

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

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

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

Title: D () Delete
Name: AGNEW, WENDY
Address: 9735 LINGWOOD TR
City-St-Zip: ORLANDO, FL 32817

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VPD (X) Change () Addition
Name: BENTON, LOWELL
Address: 7340B DANIEL WEBSTER DR
City-St-Zip: WINTER PARK, FL 32792

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

Title: SD (X) Change () Addition
Name: WILLIAMS, AMANDA
Address: 3041D GEORGE MASON AVE
City-St-Zip: WINTER PARK, FL 32792

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: AHLONA BOUNDS

PD

04/02/2009

Electronic Signature of Signing Officer or Director

Date