

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 08, 2007 8:00 am
Secretary of State

02-08-2007 90059 038 ****61.25

DOCUMENT # 745992

1. Entity Name

CORTEZ VILLAS CONDOMINIUM 9 ASSOCIATION, INC.



Principal Place of Business

Mailing Address

4106 33RD AVE. DR. W.
BRADENTON FL 34205-1140

3616 34TH AVE. DR. W.
BRADENTON FL 34205
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1886277

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/06)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CLARK, GLENN R
3616 34TH AVE. DR. W.
BRADENTON FL 34205

Name Aileen C. Haines

Street Address (P.O. Box Number is Not Acceptable)

3806 34th Ave. West

City Bradenton

FL

Zip Code

34205-1121

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Aileen C. Haines Aileen C. Haines Secretary-Treasurer 1/30/07

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	PARSONS, EMMETT	
STREET ADDRESS	4114 33RD AVE DR, W	
CITY-ST-ZIP	BRADENTON FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	HIMES, NORMAN	
STREET ADDRESS	3806 34TH AVE. W.	
CITY-ST-ZIP	BRADENTON FL 34205	
TITLE	SD	<input type="checkbox"/> Delete
NAME	HAINES, AILEEN	
STREET ADDRESS	3806 34TH AVE W	
CITY-ST-ZIP	BRADENTON FL 34205	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	SCHWARTZ, HAROLD	
STREET ADDRESS	4101 33RD AV DR W	
CITY-ST-ZIP	BRADENTON FL 34205	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	HOSIE, VIRGINIA	
STREET ADDRESS	4010 34TH AVE W	
CITY-ST-ZIP	BRADENTON FL 34205	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	CLARK, GLENN R	
STREET ADDRESS	3616 34TH AVE. DR. W.	
CITY-ST-ZIP	BRADENTON FL 34205	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HIMES, NORMAN	
STREET ADDRESS	4102 33RD AVE DR, W	
CITY-ST-ZIP	BRADENTON, FL 34205	
TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAINES, AILEEN	
STREET ADDRESS	3806 34 th AVE. W.	
CITY-ST-ZIP	BRADENTON, FL 34205-1121	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Aileen C. Haines Aileen C. Haines Secy-Treas

1/30/07

Date

941-756-1232

Daytime Phone #