2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746705

FILED Feb 05, 2008 Secretary of State

Entity Name: CORDOVA GREENS IV A CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

4174 WOODLANDS PKWY. PALM HARBOR, FL 34685 US

Current Mailing Address: New Mailing Address:

4174 WOODLANDS PKWY. PALM HARBOR, FL 34685 US

FEI Number: 59-1989589 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NOLAN, JAMES M SR
FIRST CHOICE ASSOC. MGMT
4174 WOODLANDS PKWY.
PALM HARBOR, FL 34685 US

NOLAN, JAMES
FIRST CHOICE ASSOC. MGMT
4174 WOODLANDS PKWY.
PALM HARBOR, FL 34685 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 NOLAN 02/05/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD () Delete Title: PRES (X) Change () Addition

Name: KEY, ERIKA Name: BENNETT, BARBARA

Address: 8699 BARDMOUR BLVD SUITE 305 Address: 4174 WOODLANDS PARKWAY
City-St-Zip: LARGO, FL 33777 City-St-Zip: PALM HARBOR, FL 34685

Name: BENNETT, BARBARA Name: MURPHY, RICHARD

Address: 2699 BARDMOOR BLVD., UNIT 101 Address: 4174 WOODLANDS PARKWAY
City-St-Zip: LARGO, FL 33777 City-St-Zip: PALM HARBOR, FL 34685

Name: MURPHY, RICHARD Name: KEY, ERIKA

 Address:
 8313 ANN WOOD RD.
 Address:
 4174 WOODLANDS PARKWAY

 City-St-Zip:
 LARGO, FL 33777
 City-St-Zip:
 PALM HARBOR, FL 34685

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: JAMES NOLAN AGEN 02/05/2008