2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# 746907

Entity Name: CEDAR ARMS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

ROSSMAN REALTY PROPERTY MGMT
1104 SE 46TH LANE #2
CAPE CORAL, FL 33904 US

New Principal Place of Business:

824 SE 46TH STREET
CAPE CORAL, FL 33904 US

Current Mailing Address:

ROSSMAN REALTY PROPERTY MGMT
1104 SE 46TH LANE #2
CAPE CORAL, FL 33904 US

New Mailing Address:

FEI Number: 59-1970797 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROSSMAN, MICHELLE CAM
ROSSMAN REALTY PROPERTY MGMT LLC
1104 SE 46TH LANE #2
CAPE CORAL, FL 33904 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: BASTONE, TERESA
Address: 824 SE 46 STREET 2-C
City-St-Zip: CAPE CORAL, FL 33904

Title: VD ( ) Delete
Name: DILECE, COSIMO
Address: 55 GRIFFIN AVE.
City-St-Zip: YONKERS, NY 10710

Title: STD ( ) Delete
Name: MILLER, MARTIN
Address: 21 MANLLEY PLACE
City-St-Zip: NEW HYDE PARK, NY 11040

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change ( ) Addition
Name: BASTONE, TERESA
Address: 824 SE 46 STREET #2C
City-St-Zip: CAPE CORAL, FL 33904

Title: STD (X) Change ( ) Addition
Name: DILECE, COSIMO
Address: 228 NICHOLAS PKWY E
City-St-Zip: CAPE CORAL, FL 33990

Title: D (X) Change ( ) Addition
Name: MILLER ARPINO, LAURA
Address: 230-22 57TH ROAD
City-St-Zip: OAKLAND GARDENS, NY 11364

Title: PD ( ) Change (X) Addition
Name: STEVENS, JAMES
Address: 824 SE 46TH STREET #1C
City-St-Zip: CAPE CORAL, FL 33904

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: MICHELLE ROSSMAN, CAM CAM 04/15/2009
Electronic Signature of Signing Officer or Director Date