2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2009
Secretary of State

DOCUMENT# 747718

Entity Name: VENDOME CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1404 MIRAMAR ST.
CAPE CORAL, FL 33904 US

New Principal Place of Business:

Current Mailing Address:

3644 TAMLINSON ST
BONITA SPRINGS, FL 34134 US

New Mailing Address:

3644 TOMLINSON ST
BONITA SPRINGS, FL 34134 US

FEI Number: 59-2162533 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

KELLY, PATRICIA
3644 TOMLINSON ST
BONITA SPRINGS, FL 34134 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: V ( ) Delete
Name: GAGNE, SAM
Address: 1404 MIRAMAR ST . #200
City-St-Zip: CAPE CORAL, FL 33904

Title: D ( ) Delete
Name: ORNDAHL, EVERT
Address: 1404 MIRAMAR ST. #108
City-St-Zip: CAPE CORAL, FL 33904

Title: P ( ) Delete
Name: DALE, RAYMOND
Address: 1404 MIRAMAR ST #210
City-St-Zip: CAPE CORAL, FL 33904

Title: TD ( ) Delete
Name: KELLY, PAT
Address: 3644 TOMLISON ST
City-St-Zip: BONITA SPRINGS, FL 34134

Title: SD ( ) Delete
Name: PRIGGE, JUDITH
Address: 1404 MIRAMAR ST #106
City-St-Zip: CAPE CORAL, FL 33904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: JOHNSON, TED
Address: 1404 MIRAMAR ST. #102
City-St-Zip: CAPE CORAL, FL 33904

Title: P (X) Change ( ) Addition
Name: CELLINI, JOSEPH
Address: 1404 MIRAMAR ST #110
City-St-Zip: CAPE CORAL, FL 33904

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 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: P. KELLY TD 05/04/2009

Electronic Signature of Signing Officer or Director — Date