


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 05, 2006 8:00 am**  
**Secretary of State**

04-05-2006 90157 002 \*\*\*\*61.25

<b>DOCUMENT # 748721</b>					
1. Entity Name <b>CORTEZ VILLAS CONDOMINIUM 11 ASSOCIATION, INC.</b>					
Principal Place of Business <b>3906 36TH AVE. DR. W. BRADENTON FL 34205 US</b>			Mailing Address <b>3804 36TH AVENUE DRIVE, WEST BRADENTON FL 34205 US</b>		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number <b>59-1932504</b>	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	



1st MOORE CR2E037 (10/05)

6. Name and Address of Current Registered Agent <b>MARSHALL, ERNEST S 615 9TH STREET WEST BRADENTON FL 34205</b>				7. Name and Address of New Registered Agent	
				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reappointing) DATE \_\_\_\_\_

<b>FILE NOW: FEE IS \$61.25 Due By May 1, 2006</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>	<b>Make Check Payable to Florida Department of State</b>
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10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE	TD	<input type="checkbox"/> Delete		TITLE	1VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	FELDMAN, EDWARD			NAME	AUMENT, DONALD		
STREET ADDRESS	3906 36TH AVE DR W			STREET ADDRESS	3612 36 AVE DR W		
CITY-ST-ZIP	BRADENTON FL			CITY-ST-ZIP	BRADENTON FL		
TITLE	2VD	<input type="checkbox"/> Delete		TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	DORRION, MAJORIE			NAME	KINDLE, DOLORES		
STREET ADDRESS	3802 36TH AVE. DR. W.			STREET ADDRESS	3701 39 ST W		
CITY-ST-ZIP	BRADENTON FL			CITY-ST-ZIP	BRADENTON FL		
TITLE	D	<input type="checkbox"/> Delete		TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	RAMSEY, BARBARA			NAME	MEDEIROS, JOHN		
STREET ADDRESS	3701 36TH AVE DR W			STREET ADDRESS	3804 36 AVE DR W		
CITY-ST-ZIP	BRADENTON FL			CITY-ST-ZIP	BRADENTON FL		
TITLE	VD	<input checked="" type="checkbox"/> Delete		TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	LOGAN, JOHN			NAME	MEDEIROS, MARIE		
STREET ADDRESS	3703 39 ST. W			STREET ADDRESS	3804 36 AVE DR W		
CITY-ST-ZIP	BRADENTON FL 34205			CITY-ST-ZIP	BRADENTON, FL		
TITLE	PD	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MCALLISTER, JACK			NAME			
STREET ADDRESS	3617 36TH AVE. DR. W.			STREET ADDRESS			
CITY-ST-ZIP	BRADENTON FL 34205			CITY-ST-ZIP			
TITLE	D	<input checked="" type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	PORTER, KENNETH			NAME			
STREET ADDRESS	3707 39TH ST. W.			STREET ADDRESS			
CITY-ST-ZIP	BRADENTON FL 34205			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:** Edward J. Feldman 4/1/06 941-755-3951