

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750464

FILED
Jan 07, 2010
Secretary of State

Entity Name: STEAMBOAT BEND CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

9411 CYPRESS LAKE DRIVE
SUITE 2
FORT MYERS, FL 33919 US

New Principal Place of Business:

Current Mailing Address:

9411 CYPRESS LAKE DRIVE
SUITE 2
FORT MYERS, FL 33919 US

New Mailing Address:

FEI Number: 59-1962997

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHOO, PATRICIA
C/O SCHOO MANAGEMENT, INC
9411 CYPRESS LAKE DRIVE, SUITE 2
FORT MYERS, FL 33919 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: P
Name: LEHMANN, JOHN
Address: 4240 STEAMBOAT BEND # 201
City-St-Zip: FT MYERS, FL 33919

Title: VP
Name: RACHFAL, KARL
Address: 4250 STEAMBOAT BEND #206
City-St-Zip: FORT MYERS, FL 33919

Title: TREA
Name: BURG, WILLIAM
Address: 4200 STEAMBOAT BEND #401
City-St-Zip: FORT MYERS, FL 33919

Title: SEC
Name: DILLMAN, RON
Address: 4240 STEAMBOAT BEND #205
City-St-Zip: FORT MEYERS, FL 33919

Title: D
Name: CARENA, ROY
Address: 4210 STEAMBOAT BEND #304
City-St-Zip: FORT MYERS, FL 33919

Title: D
Name: VALENT, JACK
Address: 4210 STEAMBOAT BEND # 502
City-St-Zip: FORT MYERS, FL 33919

I hereby 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 all other like empowered.

SIGNATURE: PATRICIA PHELAN

CAM

01/07/2010

Electronic Signature of Signing Officer or Director

Date