

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751797

FILED  
Jan 28, 2009  
Secretary of State

**Entity Name:** PRINCESS MARTHA APARTMENTS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

101 73RD ST  
HOLMES BEACH, FL 34217 US

**New Principal Place of Business:**

**Current Mailing Address:**

5500 MARINA DR  
STE ONE  
HOLMES BEACH, FL 34217 US

**New Mailing Address:**

**FEI Number:** 59-2467103      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

HEROLD, JR WILLIAM M  
5500 MARINA DR STE ONE  
HOLMES BEACH, FL 34217 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: LANGE, DONALD  
Address: 714 WOODWARD DR.  
City-St-Zip: MADISON, WI

Title: DVP ( ) Delete  
Name: PHILLIPS, ADDIE,  
Address: 865 LILA STREET  
City-St-Zip: BARTOW, FL

Title: SD ( ) Delete  
Name: COLLINS, PETER  
Address: 69TH FERNANDEZ DR.  
City-St-Zip: RIVERVIEW, FL 33569

Title: D ( ) Delete  
Name: HEROLD, JR WILLIAM M  
Address: 5500 MARINA DR STE ONE  
City-St-Zip: HOLMES BEACH, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

Title: D (X) Change ( ) Addition  
Name: HEROLD, JR WILLIAM M  
Address: 5500 MARINA DR STE ONE  
City-St-Zip: HOLMES BEACH, FL 34217 US

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: PETE COLLINS

D

01/28/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date