



2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2008 8:00 am
Secretary of State

04-21-2008 90051 022 ****61.25

DOCUMENT # 752107 1. Entity Name IRONWOOD ELEVENTH CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 381 INTERSTATE BLVD SARASOTA, FL 34240 US			Mailing Address C/O SUN VAST MGMT PO BOX 50332 SARASOTA, FL 34232 US		
2. Principal Place of Business - No P.O. Box # 4301 32nd St. W Suite, Apt. #, etc. A-20 City & State Bradenton, FL Zip 34205 Country US		3. Mailing Address 4301 32nd St. W Suite, Apt. #, etc. Suite A20 City & State Bradenton, FL Zip 34205 Country US			
4. FEI Number 59-2182752		Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent SUN VAST MGMT & SERVICES, INC 381 INTERSTATE BLVD SARASOTA, FL 34231			7. Name and Address of New Registered Agent Name C/S Condominium Mgmt Svcs, Inc. Street Address (P.O. Box Number is Not Acceptable) 4301 32nd St. West, A-20 City Bradenton FL Zip Code 34205		
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 <u><i>Sherie Brown</i></u> Sherie Brown 4-17-08 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BALLAST, DON 3660 IRONWOOD CIR, 403M BRADENTON, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Elizabeth Rock 3660 Ironwood Circle #705 Bradenton, FL 34209	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	POSPISIL, LORRAINE 3660 IRONWOOD CIRCLE #606 BRADENTON, FL 34209	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Ruby Kanis 3660 Ironwood Circle #604m Bradenton, FL 34209	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BRINN, ELSIE 3660 IRONWOOD CIRCLE, #605M BRADENTON, FL 34209	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	David Gardner 4440 Fairways Blvd Bradenton, FL 34209	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MENDELSON, DOLLY 3660 IRONWOOD CIRCLE # BRADENTON, FL 34209	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vic DelPo220 3660 Ironwood Circle #302 Bradenton, FL 34209	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	HABROUCK, KATHERINE 3660 IRONWOOD CIRCLE BRADENTON, FL 34209	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u><i>David Gardner</i></u> David Gardner, Pres 4-17-08 941-258-9454 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					