

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752499

FILED  
Apr 22, 2009  
Secretary of State

**Entity Name:** SIERRA CONDOMINIUM APARTMENTS ASSOCIATION, INC.

**Current Principal Place of Business:**

1001 SE MONTEREY RD  
STUART, FL 34994

**New Principal Place of Business:**

**Current Mailing Address:**

1001 SE MONTEREY RD  
STUART, FL 34994

**New Mailing Address:**

**FEI Number:** 59-2169035

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CONRAN, JUDY L  
SIERRA CONDOMINIUM APARTMENTS  
1001 SE MONTEREY RD.  
STUART, FL 34994 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: VD ( ) Delete  
Name: SHELL, JOHN W  
Address: 1001 S.E. MONTEREY ROAD  
City-St-Zip: STUART, FL 34994

Title: VD ( ) Delete  
Name: MOSER, KEITH  
Address: 411 S.W. NAMOIT PLACE  
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: SD ( ) Delete  
Name: JOHNSON, ELEANOR  
Address: 857 SW COMMONWEALTH ROAD  
City-St-Zip: PORT ST LUCIE, FL

Title: PD ( ) Delete  
Name: RHODES, WILLIAM T  
Address: 1508 S.E. WESTMORELAND BLVD  
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: TD ( ) Delete  
Name: BARGHOUTHY, SAM  
Address: 661 NE ZEBRINA SENDA DRIVE  
City-St-Zip: JENSEN BEACH, FL 34957

**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: ( ) 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: WILLIAM THOMAS RHODES

PRES

04/22/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date