

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754625

FILED
Feb 22, 2009
Secretary of State

Entity Name: EL CONQUISTADOR NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

5915 LAVISTA LN.
BRADENTON, FL 34210

New Principal Place of Business:

3412 FALCON PLACE
BRADENTON, FL 34210

Current Mailing Address:

5915 LAVISTA LN.
BRADENTON, FL 34210

New Mailing Address:

3412 FALCON PLACE
BRADENTON, FL 34210

FEI Number: 59-2043095

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHLACKS, WILLIAM
3412 FALCON PL.
BRADENTON, FL 34210 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: D () Delete
Name: RYNDRESS, ROBERT
Address: 4362 MIRABELLA CIRCLE
City-St-Zip: BRADENTON, FL 34210

Title: P () Delete
Name: SCHLACKS, WILLIAM
Address: 3412 FALCON PLACE
City-St-Zip: BRADENTON, FL 34210

Title: D () Delete
Name: BOZARTH, OPAL
Address: 6143 43 STREET
City-St-Zip: BRADENTON, FL 34210

Title: VD () Delete
Name: FIEDLER, JOHN
Address: 5915 LA VISTA LANE
City-St-Zip: BRADENTON, FL 34210

Title: S () Delete
Name: TAYLOR, SALLY
Address: 6120 45TH ST N
City-St-Zip: BRADENTON, FL 34210

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: VP (X) Change () Addition
Name: FIEDLER, JOHN
Address: 5915 LA VISTA LANE
City-St-Zip: BRADENTON, FL 34210

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 SCHLACKS

P

02/22/2009

Electronic Signature of Signing Officer or Director

Date