

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755044

FILED
Feb 13, 2009
Secretary of State

Entity Name: MARTINIQUE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6184 MICHELLE WAY #214B
300
FT. MYERS, FL 33919 US

New Principal Place of Business:

6184 MICHELLE WAY #300
FT. MYERS, FL 33919 US

Current Mailing Address:

6184 MICHELLE WAY #214B
300
FT. MYERS, FL 33919 US

New Mailing Address:

6184 MICHELLE WAY #300
FT. MYERS, FL 33919 US

FEI Number: 59-2152199

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEWBY, JERRY
552 PLAZA DEL SOL
FORT MYERS, FL 339192945 US

Name and Address of New Registered Agent:

NEWBY, JERRY
552 PLAZA DEL SOL
FORT MYERS, FL 339172945 US

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: JERRY NEWBY

02/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: QUERCIAGROSSA, AUGUST
Address: 6184 MICHELLE WY # 138
City-St-Zip: FORT MYERS, FL 33919

Title: VD () Delete
Name: WIRTZ, MELVIN
Address: 6184 MICHELLE WAY #215-B
City-St-Zip: FT MYERS, FL 33919

Title: PD () Delete
Name: WHITTINGTON, BESS
Address: 6184 MICHELLE WY # 240
City-St-Zip: FORT MYERS, FL 33919

Title: SD () Delete
Name: BALDWIN, ETHEL
Address: 6184 MICHELLE WAY # 222
City-St-Zip: FORT MYERS, FL 33919

Title: D () Delete
Name: BOWERS, DOUGLAS
Address: 6184 MICHELLE WY # 220
City-St-Zip: FORT MYERS, FL 33919

Title: D () Delete
Name: RUSSOITTI, CARL
Address: 6184 MICHELLE WAY 238
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: PD (X) Change () Addition
Name: WHITTINGTON, BESS
Address: 6184 MICHELLE WY # 140A
City-St-Zip: FORT MYERS, FL 33919

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: JERRY NEWBY

RA

02/13/2009

Electronic Signature of Signing Officer or Director

Date