

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755459

FILED
Jan 09, 2009
Secretary of State

Entity Name: SUNWARD CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

SUNWARD CONDO ASSN
4420 SANTA BARBARA BLVD #106
CAPE CORAL, FL 33914

New Principal Place of Business:

Current Mailing Address:

SUNWARD CONDO ASSN
4420 SANTA BARBARA BLVD #106
CAPE CORAL, FL 33914

New Mailing Address:

SUNWARD CONDO ASSN
4420 SANTA BARBARA BLVD #106
CAPE CORAL, FL 33914 US

FEI Number: 59-2068173

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOMBARDI, JOHN
4420 SANTA BARBARA BLVD #106
CAPE CORAL, FL 33914 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: LOMBARDI, JOHN
Address: 4420 SANTA BARBARA BLVD #106
City-St-Zip: CAPE CORAL, FL 33914

Title: D () Delete
Name: LEHNE, THOMAS
Address: 4426 SANTA BARBARA BLVD, #101
City-St-Zip: CAPE CORAL, FL 33914

Title: BD () Delete
Name: BEA, LEHNE
Address: 4426 SANTA BARBARA BLVD #101
City-St-Zip: CAPE CORAL, FL 33914

Title: BD () Delete
Name: ANTIC, DOMICK
Address: 4420 SANTA BARBARA BLVD #106
City-St-Zip: CAPE CORAL, FL 33914

Title: ST () Delete
Name: LOMBARDI, PAT
Address: 420 SANTA BARBARA BLVD, #106
City-St-Zip: CAPE CORAL, FL 33914

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: MR (X) Change () Addition
Name: LEHNE, THOMAS
Address: 4426 SANTA BARBARA BLVD, #101
City-St-Zip: CAPE CORAL, FL 33914

Title: MRS (X) Change () Addition
Name: BEA, LEHNE
Address: 4426 SANTA BARBARA BLVD #101
City-St-Zip: CAPE CORAL, FL 33914

Title: MR (X) Change () Addition
Name: ANTIC, DOMICK
Address: 4420 SANTA BARBARA BLVD #106
City-St-Zip: CAPE CORAL, FL 33914

Title: MRS (X) Change () Addition
Name: LOMBARDI, PAT
Address: 420 SANTA BARBARA BLVD, #106
City-St-Zip: CAPE CORAL, FL 33914

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: THOMAS LEHNE

VP

01/09/2009

Electronic Signature of Signing Officer or Director

Date