

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758489

FILED
Apr 24, 2009
Secretary of State

Entity Name: VIA ROMA BEACH RESORT OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2408 GULF DR
BRADENTON BCH, FL 34217 US

New Principal Place of Business:

Current Mailing Address:

4960 CONFERENCE WAY N.
SUITE #100
BOCA RATON, FL 33431 US

New Mailing Address:

FEI Number: 59-2187252 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: STD () Delete
Name: DODD, TERRY
Address: 4960 BLUE LAKE DR. , ATTN: B6 PM
City-St-Zip: BOCA RATON, FL 33431

Title: PD () Delete
Name: CONKIN, CRAIG
Address: 6710 ELLENTON GILLETTE RD., #222
City-St-Zip: PALMETTO, FL 34221

Title: D () Delete
Name: DIERKING, STEPHEN
Address: 18618 WALKER ROAD
City-St-Zip: LUTZ, FL 33549

Title: VD () Delete
Name: VONTRESS, THEODORE
Address: 2709 HERITAGE LN
City-St-Zip: BRADENTON, FL 34209

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ST/D (X) Change () Addition
Name: DODD, TERRY
Address: 4960 BLUE LAKE DR. , ATTN: B6 PM
City-St-Zip: BOCA RATON, FL 33431

Title: P/D (X) Change () Addition
Name: CONKIN, CRAIG
Address: 6710 ELLENTON GILLETTE RD., #222
City-St-Zip: PALMETTO, FL 34221

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

Title: VP/D (X) Change () Addition
Name: VONTRESS, THEODORE
Address: 2709 HERITAGE LN
City-St-Zip: BRADENTON, FL 34209

Title: D () Change (X) Addition
Name: PROCHASKA, D. DEAN
Address: 5519 52ND AVENUE WEST
City-St-Zip: BRADENTON, FL 34210

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: TERRY DODD

ST/D

04/24/2009

Electronic Signature of Signing Officer or Director

Date