2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759678

FILED Mar 04, 2009 Secretary of State

Entity Name: MONTEREY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

4957-4961 VICEROY ST. CAPE CORAL, FL 33904 US

Current Mailing Address: New Mailing Address:

C/O GPM INC C/O GPM INC

POB 151845 1319 MIRAMAR ST STE 101 CAPE CORAL, FL 33915 US CAPE CORAL, FL 33904 US

FEI Number: 59-2785495 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ZUNINO, PAOLA ZUNINO, PAOLA

2799 DEL PRADO BVLD 1319 MIRAMAR ST STE 101 NORTH FORT MYERS, FL 33903 US CAPE CORAL, FL 33904 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: PAOLA ZUNINO 03/04/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: () Change () Addition

 Name:
 STURTECKY, RONALD S
 Name:

 Address:
 4957 VICE ROY ST. #205
 Address:

 City-St-Zip:
 CAPE CORAL, FL 33904 US
 City-St-Zip:

Title: VD () Delete Title: () Change () Addition

 Name:
 THOMAS, FERRARA
 Name:

 Address:
 4959 VICEROY ST. #104
 Address:

 City-St-Zip:
 CAPE CORAL, FL 33904 US
 City-St-Zip:

Title: STD () Delete Title: () Change () Addition

 Name:
 SCHWARTZ, DAVID
 Name:

 Address:
 4173 N KEYSTONE AVE
 Address:

 City-St-Zip:
 INDIANAPOLIS, IN 46205 US
 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: RONALD STURTECKY PRES 03/04/2009