

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760399

FILED
May 12, 2011
Secretary of State

Entity Name: THE CUMBERLAND CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

8695 COLLEGE PKWY., STE 1261
C/O FRAN ROTINO
FT. MYERS, FL 33919

New Principal Place of Business:

%GULF BREEZE MANAGEMENT SERVICES, LLC
8910 TERRENE COURT, SUITE 200
BONITA SPRINGS, FL 34135

Current Mailing Address:

8695 COLLEGE PKWY., STE 1261
C/O FRAN ROTINO
FT. MYERS, FL 33919

New Mailing Address:

%GULF BREEZE MANAGEMENT SERVICES, LLC
8910 TERRENE COURT, SUITE 200
BONITA SPRINGS, FL 34135

FEI Number: 59-2278965

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAGER, KENNETH D
CAPITAL PROPERTIES GROUP
3364 CLEVELAND AVE
FORT MYERS, FL 33901 US

Name and Address of New Registered Agent:

WEIDNER, RALPH L
%GULF BREEZE MANAGEMENT SERVICES, LLC
8910 TERRENE COURT, SUITE 200
BONITA SPRINGS, FL 34135 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: RALPH L. WEIDNER, CAM

05/12/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD
Name: LANG, DAVID
Address: 7124 LAKERIDGE COURT, #127
City-St-Zip: FORT MYERS, FL 33907

Title: PD
Name: LIBERTORE, CARL
Address: 7116 LAKERIDGE COURT, #207
City-St-Zip: FT MYERS, FL 33907

Title: TD
Name: WADDELL, KENNARD
Address: 7125 LAKERIDGE COURT, #222
City-St-Zip: FT MYERS, FL 33907

Title: SD
Name: FAULKNER, MARY
Address: 7115 LAKERIDGE COURT, #110
City-St-Zip: FORT MYERS, FL 33907

Title: D
Name: DALE, LOWELL
Address: 7115 LAKERIDGE COURT, #112
City-St-Zip: FORT MYERS, FL 33907

I hereby 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 all other like empowered.

SIGNATURE: CARL LIBERTORE

PRES

05/12/2011

Electronic Signature of Signing Officer or Director

Date