

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765567

FILED
Jan 07, 2009
Secretary of State

Entity Name: CORDOVA VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6212 39TH AVENUE WEST
BRADENTON, FL US

New Principal Place of Business:

Current Mailing Address:

4301 32RD ST W
SUITE A 20
BRADENTON, FL 34205 US

New Mailing Address:

FEI Number: 25-0945921 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

C&S CONDOMINIUM MANAGEMENT SERVICES
4301 32ND STREET, WEST
SUITE A19
BRADENTON, FL 34205 US

Name and Address of New Registered Agent:

C&S CONDOMINIUM MANAGEMENT SERVICES
4301 32ND STREET, WEST
SUITE A20
BRADENTON, FL 34205 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: _____

01/07/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: NUDI, ALFREDO
Address: 6112 39TH AVE W
City-St-Zip: BRADENTON, FL 34209

Title: SD () Delete
Name: WEIRICH, CAROL
Address: 3712 59TH DR.W
City-St-Zip: BRADENTON, FL 34209

Title: D () Delete
Name: SCHLICHTING, HENRY
Address: 3614 59TH ST DR W
City-St-Zip: BRADENTON, FL 34207

Title: VPD () Delete
Name: PHELPS, MARION
Address: 5904 39TH AVE W
City-St-Zip: BRADENTON, FL 34209

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: DT () Change (X) Addition
Name: SIMS, BRUCE
Address: 5904 39TH AVE W
City-St-Zip: BRADENTON, FL 34209

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: ALFREDO NUDI

DP

01/07/2009

Electronic Signature of Signing Officer or Director

Date