

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766283

FILED
Jul 14, 2009
Secretary of State

Entity Name: ADMIRAL'S QUARTERS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1030 SE 46TH ST.
CAPE CORAL, FL 33904

New Principal Place of Business:

Current Mailing Address:

1030 SE 46TH ST.
CAPE CORAL, FL 33904

New Mailing Address:

FEI Number: 59-2459786 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

NORRIS, WILLIAM
1030 SE 46TH STREET
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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: NORRIS, WILLIAM
Address: 1030 SE 46TH ST #201
City-St-Zip: CAPE CORAL, FL

Title: VD () Delete
Name: WIACEK, SHIRLEY A
Address: 1030 SE 46TH ST # 204
City-St-Zip: CAPE CORAL, FL

Title: SD () Delete
Name: IANNINI, JANE
Address: 1030 SE 46TH STREET #104
City-St-Zip: CAPE CORAL, FL

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:

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: WILLIAM NORRIS

P

07/14/2009

Electronic Signature of Signing Officer or Director

Date