

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768968

FILED  
Mar 11, 2009  
Secretary of State

**Entity Name:** LINDERHOF CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1319 MIRAMAR ST  
UNIT 101  
CAPE CORAL, FL 33904 US

**New Principal Place of Business:**

1003 SW 47TH TERR  
CAPE CORAL, FL 33914 US

**Current Mailing Address:**

P.O. BOX 151845  
CAPE CORAL, FL 33915 US

**New Mailing Address:**

1319 MIRAMAR ST  
STE 101  
CAPE CORAL, FL 33904 US

**FEI Number:** 59-2300704

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CAM, PAOLA ZUNINO  
1319 MIRAMAR ST  
#101  
CAPE CORAL, FL 33904 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: PASSAUDUA, ERSIUA  
Address: 1003 SW 47TH TERRACE #104  
City-St-Zip: CAPE CORAL, FL 33914

Title: VD ( ) Delete  
Name: SKEWES, RICHARD  
Address: 1003 SW 47TH TERRACE #204  
City-St-Zip: CAPE CORAL, FL

Title: P ( ) Delete  
Name: SMILES, DIANE B  
Address: 1003 SW 47 TERR #201  
City-St-Zip: CAPE CORAL, FL 33914

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

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

Title: VD (X) Change ( ) Addition  
Name: IORIO, KAY  
Address: 1003 SW 47TH TERRACE #102  
City-St-Zip: CAPE CORAL, FL

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: DIANE SMILES

PRES

03/11/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date