

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769568

FILED
Apr 23, 2009
Secretary of State

Entity Name: IRONWOOD SIXTEENTH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6108-26TH ST. W.
BRADENTON, FL 34207

New Principal Place of Business:

6108-26TH ST. W.
STE 4
BRADENTON, FL 34207

Current Mailing Address:

6108-26TH ST. W.
BRADENTON, FL 34207

New Mailing Address:

6108-26TH ST. W.
STE 4
BRADENTON, FL 34207

FEI Number: 59-2517272

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GODDARD, JAMES R
6108 26TH ST W
BRADENTON, FL 34207 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: TD () Delete
Name: WILLIAMS, NILES A
Address: 3620 IRONWOOD CIR
City-St-Zip: BRADENTON, FL 34209

Title: SD () Delete
Name: JENTSCH, LINDA
Address: 3620 IRONWOOD CIR 304-0
City-St-Zip: BRADENTON, FL 34209

Title: PD () Delete
Name: VANDERVEEN, ROBERT
Address: 6108 26TH ST W STE #4
City-St-Zip: BRADENTON, FL 34207

Title: VP () Delete
Name: SIEGMUND, DON
Address: 3620 IRONWOOD CIR 102-0
City-St-Zip: BRADENTON, FL 34209

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:

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: JAMES R GODDARD

RA

04/23/2009

Electronic Signature of Signing Officer or Director

Date