2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007576

FILED Apr 29, 2009 Secretary of State

Entity Name: CORINTH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: STERLING MANAGEMENT 1904 CLUBHOUSE DR SUN CITY CENTER, FL 33573 **New Mailing Address: Current Mailing Address:** STERLING MANAGEMENT 1904 CLUBHOUSE DR SUN CITY CENTER, FL 33573 FEI Number: 59-3694912 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LAW OFF. J R DE FURIO, P.A. WETHERINGTON, HAMILTON, HARRISON & FAIR PA 201 E KENNEDY BLVD 1010 N. FLORIDA AVE TAMPA, FL 33602 TAMPA, FL 33602 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: RONALD COTTERILL 04/29/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition ORLOFSKY, GARY Name: Name: 1221 CORINTH GREENS DR Address: Address: City-St-Zip: SUN CITY CENTER, FL 33573 City-St-Zip: Title: () Delete Title: () Change () Addition GRIFFEN, EURICH Name: Name: Address: 1244 CORINTH GREENS DR Address: City-St-Zip: SUN CITY CENTER, FL 33573 City-St-Zip: Title: () Delete Title: () Change () Addition METCALFE, TIM Name: Name: 1217 CORINTH GREENS DR Address: Address: City-St-Zip: SUN CITY CENTER, FL 33573 City-St-Zip: Title: TD () Delete Title: () Change () Addition Name: DENTON, MARY LOU Name: 1216 CORINTH GREENS DR. Address: Address: City-St-Zip: SUN CITY CENTER, FL 33573 City-St-Zip: Title: () Delete Title: () Change () Addition MARBES, KENNETH Name: Name: 1236 CORINTH GREENS DR Address: Address: City-St-Zip: SUN CITY CENTER, FL 33573 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: BRIAN L. MAY MGR 04/29/2009