

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007897

FILED
Apr 28, 2009
Secretary of State

Entity Name: CASCADA AT FIDDLER'S CREEK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5067 TAMIAMI TRAIL EAST
NAPLES, FL 34113

New Principal Place of Business:

Current Mailing Address:

5067 TAMIAMI TRAIL EAST
STE 200
NAPLES, FL 34113

New Mailing Address:

FEI Number: 59-3690899 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CARDINAL MANAGEMENT GROUP
5067 TAMIAMI TRAIL EAST
NAPLES, FL 34113 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: P () Delete
Name: MURPHY, DANIEL
Address: 9062 CASCADA WAY #101
City-St-Zip: NAPLES, FL 34114

Title: ST () Delete
Name: LOWRY, STEPHEN
Address: 9038 CASCADA WAY #102
City-St-Zip: NAPLES, FL 34114

Title: V () Delete
Name: PETERSON, RICHARD
Address: 9106 CASCADA WAY #102
City-St-Zip: NAPLES, FL 34114

Title: D () Delete
Name: BERGMOSER, GERALD
Address: 9006 CASCADA WAY #202
City-St-Zip: NAPLES, FL 34114

Title: D () Delete
Name: BOLAND, BRIAN
Address: 9058 CASCADA WAY #102
City-St-Zip: NAPLES, FL 34114

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: () 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: DANIEL MURPHY

P

04/28/2009

Electronic Signature of Signing Officer or Director

Date