

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 29, 2009
Secretary of State**

DOCUMENT# N00000008476

Entity Name: CALYPSO CAY VACATION VILLAS OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4951 CALYPSO CAY WAY
KISSIMMEE, FL 34746

New Principal Place of Business:

Current Mailing Address:

4951 CALYPSO CAY WAY
KISSIMMEE, FL 34746

New Mailing Address:

FEI Number: 59-3721370 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOWNING, GRANT T
222 W. CONSTOCK AVE., #101
WINTER PARK, FL 32789 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: D () Delete
Name: BRADLEY, STEPHEN W
Address: 359 CAROLINA AVE.
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: RIVA, KYLE V
Address: 359 CAROLINA AVE.
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: JACOBY, GREGORY
Address: 359 CAROLINA AVE.
City-St-Zip: WINTER PARK, FL 32789

Title: AT () Delete
Name: RELVINI, PATRICIA
Address: 359 CAROLINA AVE
City-St-Zip: WINTER PARK, FL 32789

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: STEVE BRADLEY

Electronic Signature of Signing Officer or Director

PRES

01/29/2009

Date