

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008 8:00 am
Secretary of State

05-01-2008 90243 046 ****61.25

DOCUMENT # N01000002938 1. Entity Name CARDINAL ESTATES ASSOCIATION, INC.			
Principal Place of Business 2 CARDINAL ESTATES BLVD DAYTONA BEACH, FL 32117		Mailing Address 2 CARDINAL ESTATES BLVD DAYTONA BEACH, FL 32117	
2. Principal Place of Business - No P.O. Box # 22 Starling Drive Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State Daytona Beach, FL		City & State	
Zip 32117		Country Nolusia	
4. FEI Number NOT APPLICABLE		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SYKES, MICHELLE 8 Tanager Court DAYTONA BEACH, FL 32117		7. Name and Address of New Registered Agent Name Shawanda Robinson Street Address (P.O. Box Number is Not Acceptable) 22 Starling Drive City Daytona Beach FL Zip Code 32117	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Shawanda P. Robinson</i></u> President <u>4/27/08</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reissuing)			
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P SLATER, COLETTE 2 CARDINAL ESTATES BLVD DAYTONA BEACH, FL 32117	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V HARDEN, BERNETTE 16 CARDINAL ESTATES BLVD DAYTONA BEACH, FL 32117	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S SYKES, MICHELLE 8 Tanager Court DAYTONA BEACH, FL 32117	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T HARDEN, BERNETTE 16 CARDINAL ESTATES BLVD DAYTONA BEACH, FL 32117	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FORD, MATTIE 20 STARLING DR DAYTONA BEACH, FL 32117	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MITCHELL, LORIE 29 STARLING DRIVE DAYTONA BEACH, FL 32117	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P Shawanda Robinson 22 Starling Drive Daytona Beach, FL 32117	☐ Change ☒ Addition	TITLE NAME STREET ADDRESS CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V Lorie Mitchell 29 Starling Drive Daytona Beach, FL 32117	☐ Change ☒ Addition	TITLE NAME STREET ADDRESS CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S Cathy D. Reeves 15 Starling Drive Daytona Beach, FL 32117	☐ Change ☒ Addition	TITLE NAME STREET ADDRESS CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D. Demetrius Cobbs 22 Cardinal Estates Blvd. Daytona Beach, FL 32117	☐ Change ☒ Addition	TITLE NAME STREET ADDRESS CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Mattie Ford 20 Starling Drive Daytona Beach, FL 32117	☐ Change ☒ Addition	TITLE NAME STREET ADDRESS CITY - ST - ZIP
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u><i>Shawanda P. Robinson</i></u>		<u>Shawanda Robinson</u> 4/27/08 (386) 274-0013	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	