

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003566

FILED
Jan 29, 2009
Secretary of State

Entity Name: CASA MARINA III CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4321 BAY BEACH LANE
#654
FORT MYERS BEACH, FL 33931 US

New Principal Place of Business:

Current Mailing Address:

C/O INTEGRATED PROPERTY MGMT.
3435 10TH STREET N. #201
NAPLES, FL 34103

New Mailing Address:

FEI Number: 59-3723108 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANGUM, JEFF
4321 BAY BEACH LANE
#654
FORT MYERS, FL 33931 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: PD () Delete
Name: FRIEDEL, ROBERT
Address: 4311 BAY BCH LANE 712
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: TD () Delete
Name: SHARPE, NEIL
Address: 4311 BAY BEACH LANE #742
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: DV () Delete
Name: JACKOWSKI, LORRAINE
Address: 2538 RIO PALERMO CT
City-St-Zip: PUNTA GORDA, FL 33950

Title: D () Delete
Name: BERGERON, WILLIAM
Address: 13886 STEEPVIEW LANE
City-St-Zip: EVERGREEN, CO 80439

Title: D () Delete
Name: MANGUM, JEFF
Address: 4321 BAY BCH LN 654
City-St-Zip: FORT MYERS BEACH, FL 33931

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change () Addition
Name: SHARPE, NEIL
Address: 4311 BAY BEACH LANE #742
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: DVP (X) Change () Addition
Name: JACKOWSKI, LORRAINE
Address: 2538 RIO PALERMO CT
City-St-Zip: PUNTA GORDA, FL 33950

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: ROBERT FRIEDEL

PD

01/29/2009

Electronic Signature of Signing Officer or Director

Date