

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01619

FILED  
Apr 27, 2009  
Secretary of State

**Entity Name:** RIO DEL MAR CONDOMINIUM NO. FIFTEEN ASSOCIATION INC.

**Current Principal Place of Business:**

131 RIO DEL MAR RD  
SAINT AUGUSTINE, FL 32080 US

**New Principal Place of Business:**

131 RIO DEL MAR RD  
APT. J  
SAINT AUGUSTINE, FL 32080 US

**Current Mailing Address:**

131 RIO DEL MAR RD  
UNIT J  
ST. AUGUSTINE, FL 32080 US

**New Mailing Address:**

131 RIO DEL MAR RD  
APT. J  
SAINT AUGUSTINE, FL 32080 US

**FEI Number:** 59-2892227

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WILES, MARGARET  
131 J RIO DEL MAR RD  
ST. AUGUSTINE, FL 32080 US

**Name and Address of New Registered Agent:**

WILES, MARGARET  
131 RIO DEL MAR RD  
APT. J  
ST. AUGUSTINE, FL 32080 US

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: \_\_\_\_\_

04/27/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VD ( ) Delete  
Name: BEAUDOIN, JOE  
Address: 131 H RIO DEL MAR RD  
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: TD ( ) Delete  
Name: WILES, MARGARET  
Address: 131 J RIO DEL MAR RD  
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: SD ( ) Delete  
Name: PETOSKEY, MEG  
Address: 131 RIO DEL MAR UNIT I  
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: PD ( ) Delete  
Name: PETOSKEY, TED  
Address: 131 I RIO DEL MAR RD  
City-St-Zip: ST. AUGUSTINE, FL 32080

**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: MARGARET A. WILES

TD

04/27/2009

Electronic Signature of Signing Officer or Director

Date