

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01868

FILED
Jan 27, 2009
Secretary of State

Entity Name: THE COURTYARDS OF FORT MYERS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4560 VIA ROYALE
STE 4A
FORT MYERS, FL 33919 US

New Principal Place of Business:

Current Mailing Address:

4560 VIA ROYALE-
STE 4A
FORT MYERS, FL 33919 US

New Mailing Address:

4560 VIA ROYALE
STE 4A
FORT MYERS, FL 33919 US

FEI Number: 59-2490388

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARRIS, CLU, CHFC, PAUL A
4560 VIA ROYALE
STE 4B
FORT MYERS, FL 33919 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: VD () Delete
Name: MATTFELD, KENNETH F
Address: 4560 VIA ROYALE, SUITE #1
City-St-Zip: FORT MYERS, FL 33919

Title: PD () Delete
Name: PULS, ROBERT R
Address: 4560 VIA ROYALE STE 4A
City-St-Zip: FORT MYERS, FL 33919

Title: TD () Delete
Name: HARRIS, CLU, CHFC, PAUL A
Address: 4560 VIA ROYALE -STE 4B
City-St-Zip: FORT MYERS, FL 339191076

Title: SD () Delete
Name: FEW, BENJAMIN C
Address: 4560 VIE ROYALE STE 3
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: OWEN, DAVE
Address: 4560 VIA ROYALE, STE 1
City-St-Zip: FORT MYERS, FL 33919 US

Title: PD (X) Change () Addition
Name: PULS, ROBERT R
Address: 4560 VIA ROYALE, STE 4A
City-St-Zip: FORT MYERS, FL 33919 US

Title: TD (X) Change () Addition
Name: HARRIS, CLU, CHFC, PAUL A
Address: 4560 VIA ROYALE, STE 4B
City-St-Zip: FORT MYERS, FL 33919 US

Title: SD (X) Change () Addition
Name: FEW, BENJAMIN C
Address: 4560 VIE ROYALE, STE 3
City-St-Zip: FORT MYERS, FL 33919 US

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: PAUL A. HARRIS

TD

01/27/2009

Electronic Signature of Signing Officer or Director

Date