

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001389

FILED
Feb 13, 2009
Secretary of State

Entity Name: AP CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1521 AQUI ESTA DRIVE
PUNTA GORDA, FL 33950

New Principal Place of Business:

Current Mailing Address:

6025 TAYLOR RD
SUITE 2
PUNTA GORDA, FL 33950

New Mailing Address:

26530 MALLARD WAY
PUNTA GORDA, FL 33950

FEI Number: 51-0467863

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STAR HOSPITALITY MANAGEMNET
6025 TAYLOR RD SUITE 2
PUNTA GORDA, FL 33950 US

Name and Address of New Registered Agent:

STAR HOSPITALITY MANAGEMNET
26530 MALLARD WAY
PUNTA GORDA, FL 33950 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:

02/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: PERRY, JOHN
Address: 1523 AQUIESTA #5
City-St-Zip: PUNTA GORDA, FL 33950

Title: ST () Delete
Name: BIRD, SUSAN
Address: 1529 AQUIESTA
City-St-Zip: PUNTA GORDA, FL 33950

Title: P () Delete
Name: BROWER, DAVID
Address: 1521 AQUI ESTA #6
City-St-Zip: PUNTA GORDA, FL 33950

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: ST (X) Change () Addition
Name: FENERAN, THOMAS
Address: 1531 AQUI ESTA
City-St-Zip: PUNTA GORDA, FL 33950

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: DAVID BROWER

P

02/13/2009

Electronic Signature of Signing Officer or Director

Date