2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002727

FILED Apr 17, 2009 Secretary of State

Entity Name: EL RIO GARDEN CONDOMINIUM ASSOC. 156, INC. **Current Principal Place of Business: New Principal Place of Business:** 1697-1699-1731-1739 GOLF CLUB DRIVE NORTH FORT MYERS, FL 33903 **Current Mailing Address: New Mailing Address:** 757 PONDELLA RD 1739 GOLF CLUB DR. C\O JACK MORRISON UNIT 1 NORTH FORT MYERS, FL 33903 NORTH FORT MYERS, FL 33903 FEI Number: 59-1826012 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MORRISON, JACK 1697 GOLF CLUB DR APT#5 N. FT. MYERS, FL 33903 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete VERNIER, DONALD Name: Name: 1731 GOLF CLUB DRIVE APT # 1 Address: Address: City-St-Zip: N. FT. MYERS, FL 33903 City-St-Zip: Title: VD () Delete Title: (X) Change () Addition AHR, FRED Name: AHR, FRED Name: Address: 1739 GOLF CLUB DR APTE #8 Address: 1739 GOLF CLUB DR APTE #8 City-St-Zip: NORTH FORT MYERS, FL 33903 City-St-Zip: NORTH FORT MYERS, FL 33903 Title: SD () Delete Title: () Change () Addition CLANCY, SANDRA Name: Name: 1739 GOLF CLUB DR APT 3 Address: Address: City-St-Zip: NORTH FORT MYERS, FL 33903 City-St-Zip: Title: () Delete Title: TD () Change (X) Addition Name: Name: DWERTMAN, DAVID 1739 GOLF CLUB DR UNIT 1 Address: Address: City-St-Zip: City-St-Zip: N FT MYERS, FL 33903 Title: () Delete Title: () Change (X) Addition MORRISON, JACK Name: Name: 1697 GOLF CLUB DR UNIT 5 Address: Address: City-St-Zip: City-St-Zip: N FT MYERS, FL 33903

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 DWERTMAN	TD	04/17/2009
SIGNATURE. DAVID DVVERTIVIAN	טו	04/1//2009