

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 01, 2009  
Secretary of State**

DOCUMENT# N02000003910

Entity Name: THE 1721 CONDOMIUM BUILDING OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1721 SE 16 AVE  
SUITE 101  
OCALA, FL 34471

**New Principal Place of Business:**

**Current Mailing Address:**

1721 SE 16 AVE  
SUITE 101  
OCALA, FL 34471

**New Mailing Address:**

FEI Number: 11-3648816      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SAUEY, JEFFREY L  
1721 S.E. 16TH AVENUE  
SUITE 101  
OCALA, FL 34471 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: D      ( ) Delete  
Name: FONTAINE, JANE  
Address: 1721 SE 16TH AVE, SUITE 103  
City-St-Zip: Ocala, FL 34471

Title: DP      ( ) Delete  
Name: SAUEY, JEFFREY  
Address: 1721 SE 16 AVE STE 101  
City-St-Zip: Ocala, FL 34471

Title: D      ( ) Delete  
Name: GAYLORD, RON  
Address: 1721 SE 16TH AVE #104  
City-St-Zip: Ocala, FL 34471

Title: D      ( ) Delete  
Name: DITTY, DREW  
Address: 1721 SE 16 AVE STE 101  
City-St-Zip: Ocala, FL 34471

**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: D      (X) Change ( ) Addition  
Name: DITTY, DREW  
Address: 1721 SE 16 AVE STE 102  
City-St-Zip: Ocala, FL 34471

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: JEFFREY L. SAUEY

DP

04/01/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date