

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003353

FILED  
Apr 15, 2009  
Secretary of State

**Entity Name:** THE CLIPPER CONDOMINIUM ASSOCIATION OF LEE COUNTY, INC.

**Current Principal Place of Business:**

5111 MANOR CT.  
CAPE CORAL, FL 33904

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 100831  
CAPE CORAL, FL 33910

**New Mailing Address:**

FEI Number: 88-8011279

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TEAGUE, GEORGE  
2503 DEL PRADO BLVD.  
500  
CAPE CORAL, FL 33904 US

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

TEAGUE, GEORGE  
3501 DEL PRADO BLVD.  
100  
CAPE CORAL, FL 33904 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

04/15/2009

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: CONDRAD, HANK  
Address: 2503 DEL PRADO BLVD; STE 500  
City-St-Zip: CAPE CORAL, FL 33904

Title: STD ( ) Delete  
Name: ROSLAK, VINCENT  
Address: 2503 DEL PRADO BLVD; STE 500  
City-St-Zip: CAPE CORAL, FL 33904

Title: VP ( ) Delete  
Name: HESSNEY, THOMAS  
Address: 2503 DEL PRADO BLVD; STE 500  
City-St-Zip: CAPE CORAL, FL 33904

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: CONDRAD, HANK  
Address: 3501 DEL PRADO BLVD; STE 100  
City-St-Zip: CAPE CORAL, FL 33904

Title: STD (X) Change ( ) Addition  
Name: ROSLAK, VINCENT  
Address: 3501 DEL PRADO BLVD; STE 100  
City-St-Zip: CAPE CORAL, FL 33904

Title: VP (X) Change ( ) Addition  
Name: SCHMIDT, ALAN  
Address: 3501 DEL PRADO BLVD; STE 100  
City-St-Zip: CAPE CORAL, FL 33904

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: PROFESSIONAL REALTY CONSULTANTS

Electronic Signature of Signing Officer or Director

AGNT

04/15/2009

Date