2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2009
Secretary of State

DOCUMENT# N03000004697

Entity Name: SOLENZARA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

372 LENELL ROAD
FORT MYERS BEACH, FL 33931

New Principal Place of Business:

Current Mailing Address:

C/O INTEGRATED PROPERTY MANAGEMENT
3435 10TH STREET N #201
NAPLES, FL 34103

New Mailing Address:

FEI Number: 20-0157157 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PEARCE, LAWRENCE L
372 LENELL ROAD
FORT MYERS BEACH, FL 33931 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: DP ( ) Delete
Name: HERMANN, MARK
Address: 25961 HICKORY BLVD #1
City-St-Zip: BONITA SPRINGS, FL 34134

Title: DVP ( ) Delete
Name: BLAKELEY, ROBERT
Address: 25941 HICKORY BLVD
City-St-Zip: BONITA SPRINGS, FL 34134

Title: DS ( ) Delete
Name: TULLOCH, ROBERT
Address: C/O REALCO 3301 BONITA BCH RD #307
City-St-Zip: BONITA SPRINGS, FL 34134

Title: DT ( ) Delete
Name: HOLT, RANDY
Address: 25961 HICKORY BLVD #2
City-St-Zip: BONITA SPRINGS, FL 34134

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: HERRMANN, MARK
Address: 25961 HICKORY BLVD #1
City-St-Zip: BONITA SPRINGS, FL 34134

Title: DVP (X) Change ( ) Addition
Name: SHERMAN, DENNIS
Address: 25911 -2 HICKORY BLVD
City-St-Zip: BONITA SPRINGS, FL 34134

Title: DS (X) Change ( ) Addition
Name: GOODWIN-MELTON, DENISE
Address: 25911-1 HICKORY BLVD
City-St-Zip: BONITA SPRINGS, FL 34134

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

Title: D ( ) Change (X) Addition
Name: TULLOCH, ROBERT
Address: 25941 HICKORY BLVD., #1
City-St-Zip: BONITA SPRINGS, FL 34134

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: MARK HERRMANN DP 02/05/2009
Electronic Signature of Signing Officer or Director — Date