

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009035

FILED
Mar 11, 2009
Secretary of State

Entity Name: CALUSA ISLAND VILLAGE PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O SPINNAKER RAY
PO BOX 2397
MARCO ISLAND, FL 34146

New Principal Place of Business:

C/O SPINNAKER RAY
306 TO 390 ANGLER DRIVE
GOODLAND, FL 34140

Current Mailing Address:

C/O SPINNAKER RAY
PO BOX 2397
MARCO ISLAND, FL 34146

New Mailing Address:

FEI Number: 20-0672842

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDRADE, TONY
601 ELKAM CIRCLE #R-7
MARCO ISLAND, FL 34145 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: PD () Delete
Name: BEHRING, WILLIAM
Address: 421 MORNINGSTAR DRIVE
City-St-Zip: WITCHITA, KS 67218

Title: D () Delete
Name: SMITH, JAMES
Address: P O BOX 321
City-St-Zip: GOODLAND, FL 34140

Title: D () Delete
Name: GWINN, BARRY
Address: P O BOX 806
City-St-Zip: GOODLAND, FL 34140

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:

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: TONY ANDRADE

RA

03/11/2009

Electronic Signature of Signing Officer or Director

Date