

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005351

FILED
Feb 17, 2011
Secretary of State

Entity Name: VERANDAS AT MCARTHUR PALM CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O TROPICAL ISLES MGMT SRVS., LLC
12734 KENWOOD LN., SUITE 49
FT. MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address:

C/O TROPICAL ISLES MGMT SRVS., LLC
12734 KENWOOD LN., SUITE 49
FT. MYERS, FL 33907

New Mailing Address:

FEI Number: 34-1997926

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TROPICAL ISLES MGMT
12734 KENWOOD LN 49
FORT MYERS, FL 33907 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: VP
Name: RAYTROWSKY, DONNA
Address: 10241 MCARTHUR PALM LN #2326
City-St-Zip: FT. MYERS, FL 33966

Title: D
Name: REDAR, ROBERT
Address: 10401 MCARTHUR PALM LN 2523
City-St-Zip: FORT MYERS, FL 33912

Title: ST
Name: BURNER, PEGGY
Address: 10471 MCARTHUR PALM LN #2821
City-St-Zip: FT MYERS, FL 33966

Title: D
Name: CACCOMA, GEORGE
Address: 10411 MCARTHUR PALM LN 2414
City-St-Zip: FT. MYERS, FL 33966

Title: P
Name: TAYLOR, JAMES
Address: 10370 MCARTHUR PALM 2916
City-St-Zip: FT MYERS, FL 33966

I hereby 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 all other like empowered.

SIGNATURE: JAMES TAYLOR

P

02/17/2011

Electronic Signature of Signing Officer or Director

Date