2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007212

FILED Feb 26, 2009 Secretary of State

Entity Name: CARRIAGE HOMES II AT MOODY RIVER ESTATES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

3050 MOODY RIVER BLVD NORTH FORT MYERS, FL 33903

Current Mailing Address: New Mailing Address:

C/O SILVERCRESTED MANAGEMENT, LLC P.O. BOX 1848 FORT MYERS, FL 33902

FEI Number: 34-2032625 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

C/O SILVERCRESTED MANAGEMENT LLC
3446 MARINATOWN LANE
1ST FLOOR - UNIT 4
NORTH FORT MYERS, FL 33903 US

C/O SILVERCRESTED MANAGEMENT LLC
3436 MARINATOWN LANE
1ST FLOOR - UNIT 4
NORTH FORT MYERS, FL 33903 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: CHAD VAN TILBURG 02/26/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: () Change () Addition Name: RICHETELLI, FRANK Name:

 Name:
 RICHETELLI, FRANK
 Name:

 Address:
 2809 SW 46TH TERRACE
 Address:

 City-St-Zip:
 CAPE CORAL, FL 33914
 City-St-Zip:

Title: VD () Delete Title: STD (X) Change () Addition Name: BROWNSTEIN, IVAN Name: BROTBECK, RAYMOND

 Address:
 9791 MAINSAIL CT
 Address:
 3261-8 LEE WAY COURT

 City-St-Zip:
 FORT MYERS, FL 33919
 City-St-Zip:
 NORTH FORT MYERS, FL 33903

Title: STD () Delete Title: VD (X) Change () Addition Name: BILLY, RONALD JR BILLY, RONALD JR

 Address:
 10642 HARRISON CT
 Address:
 10642 HARRISON CT

 City-St-Zip:
 ROSCOE, IL 61073
 City-St-Zip:
 ROSCOE, IL 61073

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: FRANK RICHETELLI PD 02/26/2009