## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000009175

FILED Apr 23, 2009 Secretary of State

Entity Name: CUESTA DEL SOL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	FPORT BLVD S	3		
SUITE 503 SAINT PE	S TERSBURG, FI	L 337072108		
Current M	ailing Addres	s:	New Mailing Addres	ss:
8860 GULI	FPORT BLVD S	3		
SUITE 503	}			
	TERSBURG, FI			
FEI Number:	: 20-1665436	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
6860 GULÎ	STEPHEN PORT BLVD. S TERSBURG, FI	#503 L 337072308 US		
		uhmits this statement for the	ournose of changing its register.	ed office or registered agent, or both,
	named entity s e of Florida.	abilitis tilis statement for the	purpose of changing its register	- · · · · · · · · · · · · · · · · · · ·
	e of Florida.	domina tina statement for the	purpose of changing its register	
n the State	e of Florida.	ic Signature of Registered Ag		Date
in the State	e of Florida.	ic Signature of Registered Ag	ent	
in the State	e of Florida.  RE:  Electroni  S AND DIRECT  PD ()  MOELLER, KEN 6860 GULFPOR	ic Signature of Registered Ag FORS: Delete IDALL	ent	Date
in the State SIGNATUF OFFICERS Title: Name: Address:	Electronics  RE:  Electronics  S AND DIRECT  PD ()  MOELLER, KEN 6860 GULFPOR SAINT PETERSI  TD () GESSMAN, LER 6860 GULFPOR	ic Signature of Registered Ag  FORS:  Delete IDALL IT BLVD S #503 BURG, FL 337072108  Delete ROY	ent  ADDITIONS/CHANG  Title:  Name:  Address:	Date  BES TO OFFICERS AND DIRECTORS
in the State SIGNATUF OFFICERS Title: Name: Address: City-St-Zip: Vame: Name: Address:	E of Florida.  RE:  Electroni  S AND DIRECT  PD ()  MOELLER, KEN 6860 GULFPOR SAINT PETERSI  TD () GESSMAN, LER 6860 GULFPOR SAINT PETERSI  VD () POOHAR, STEP 6860 GULFPOR	ic Signature of Registered Ag  FORS:  Delete IDALL IT BLVD S #503 BURG, FL 337072108  Delete ROY IT BLVD S #503 BURG, FL 337072108  Delete PHEN	ent  ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name: Address:	Date  GES TO OFFICERS AND DIRECTORS  ( ) Change ( ) Addition

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: STEPHEN POOHAR DIR 04/23/2009