2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009329

FILED Apr 29, 2009 Secretary of State

Entity Name: CORTEZ POINTE II CONDOMINIUM ASSOCIATION, INC.

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

116 LINEBERRY BOULEVARD 5240 RIVERVIEW BLVD BRADENTON, FL 34209

Current Mailing Address: New Mailing Address:

116 LINEBERRY BOULEVARD5240 RIVERVIEW BLVDMT. JULIET, TN 37122BRADENTON, FL 34209

FEI Number: 26-3311274 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:

HINES, J. BRADFORD

100 SECOND AVENUE S

SUITE 301N

CLENDENON, JOHN
5240 RIVERVIEW BLVD
BRADENTON, FL 34209 US

ST. PETERSBURG, FL 33701 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: JOHN CLENDENON 04/29/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D () Delete
 Title:
 D VP (X) Change () Addition

 Name:
 LINEBERRY, D.MARK
 Name:
 LINEBERRY, D.MARK

 Address:
 116 LINEBERRY BOULEVARD
 Address:
 116 LINEBERRY BOULEVARD

City-St-Zip: MT. JULIET, TN 37122 City-St-Zip: MT. JULIET, TN 37122

Title: D () Delete Title: D (X) Change () Addition Name: GARCIA, DEBBIE Name: PATEL, BHARAT

 Name:
 GARCIA, DEBBIE
 Name:
 PATEL, BHARAT

 Address:
 116 LINEBERRY BOULEVARD
 Address:
 4800 N TAMIAMI TRAIL

 City-St-Zip:
 MT. JULIET, TN 37122
 City-St-Zip:
 SARASOTA, FL 34234

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf PD} \qquad {\sf (X) Change () Addition}$

 Name:
 LINEBERRY, DEWEY
 Name:
 CLENDENON, JOHN

 Address:
 116 LINEBERRY BOULEVARD
 Address:
 5240 RIVERIVEW BLVD

 City-St-Zip:
 MT. JULIET, TN 37122
 City-St-Zip:
 BRADENTON, FL 34209

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: JOHN CLENDENON P D 04/29/2009