

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009794

FILED
Apr 14, 2009
Secretary of State

Entity Name: MANDOLIN BAY VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

15990 MANDOLIN BAY DRIVE
FORT MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

ISLAND MGMT
POB 100
SANIBEL, FL 33957

New Mailing Address:

FEI Number: 20-1891728

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACKESY, STEVEN J
711 TARPON BAY RD
SANIBEL, FL 33957 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: PRICE, RANDALL G
Address: 15990 MANDOLIN BAY DRIVE
City-St-Zip: FORT MYERS, FL 33908

Title: TD () Delete
Name: DECECCO, DENISE
Address: 15998 MANDOLIN BAY DRIVE #E105
City-St-Zip: FORT MYERS, FL 33908

Title: VP () Delete
Name: NUBER, MARK
Address: 15969 MANDOLIN BAY DRIVE #A201
City-St-Zip: FORT MYERS, FL 33908

Title: D () Delete
Name: LIZADOYL, HOWARD
Address: 15998 MANDOLIN BAY DR E203
City-St-Zip: FORT MYERS, FL 33908

Title: SD () Delete
Name: ROVERE, PAM
Address: 15999 MANDOLIN BAY #206
City-St-Zip: FT. MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: FREEMAN, PAT
Address: 15999 MANDOLIN BAY DR. #D10
City-St-Zip: FT MYERS, FL 33908 US

Title: PD (X) Change () Addition
Name: DECECCO, DENISE
Address: 15998 MANDOLIN BAY DRIVE #E105
City-St-Zip: FORT MYERS, FL 33908

Title: VD (X) Change () Addition
Name: NUBER, MARK
Address: 15969 MANDOLIN BAY DRIVE #A201
City-St-Zip: FORT MYERS, FL 33908

Title: D (X) Change () Addition
Name: SMITH, LENORE
Address: 15969 MANDOLIN BAY DR. #A10
City-St-Zip: FT MYERS, FL 33908 US

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: DENISE DECECCO

PD

04/14/2009

Electronic Signature of Signing Officer or Director

Date