

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 23, 2009
Secretary of State**

DOCUMENT# N05000001510

Entity Name: VICTORIA PALMS OF DUNEDIN CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

700 LYNDHURST STREET
DUNEDIN, FL 34698

New Principal Place of Business:

Current Mailing Address:

4175 EAST BAY DRIVE
SUITE 205
CLEARWATER, FL 33764

New Mailing Address:

4585 140TH AVE NORTH
SUITE 1012
CLEARWATER, FL 33764

FEI Number: 55-0892230

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COMMUNITY MANAGEMENT CONCEPTS, INC.
4585 140TH AVE. NORTH SUITE 1012
CLEARWATER, FL 33762 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: DVPS () Delete
Name: RICKETTS, JEFFREY R
Address: 700 LYNDHURST STREET
City-St-Zip: DUNEDIN, FL 34698

Title: DPT () Delete
Name: REEVE, REID
Address: 700 LYNDHURST STREET
City-St-Zip: DUNEDIN, FL 34698

Title: D (X) Delete
Name: REEVE, DIANE
Address: 700 LYNDHURST STREET
City-St-Zip: DUNEDIN, FL 34698

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: HARWICK, RICK
Address: 700 LYNDHURST STREET
City-St-Zip: DUNEDIN, FL 34698

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: JEFFREY R RICKETTS

DVPS

03/23/2009

Electronic Signature of Signing Officer or Director

Date