

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Nov 05, 2009**  
**Secretary of State**

DOCUMENT# N05000007300

**Entity Name:** RESERVE AT MEDITERRANEAN MANORS CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**300 GULF BOULEVARD  
BELLEAIR SHORES, FL 33786**New Principal Place of Business:**3750 GUNN HIGHWAY  
SUITE 109  
TAMPA, FL 33618**Current Mailing Address:**20550 S. LAGRANGE ROAD  
SUITE 310  
FRANKFORT, IL 60423**New Mailing Address:**3750 GUNN HIGHWAY  
SUITE 109  
TAMPA, FL 33618**FEI Number:** 83-0473624**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**PARSONS, ROBERT W  
300 GULF BLVD.  
BELLEAIR SHORES, FL 33786 US**Name and Address of New Registered Agent:**VIDE, AVELINO  
3750 GUNN HIGHWAY  
SUITE 109  
TAMPA, FL 33618 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: AVELINO VIDE

11/05/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete  
Name: PARSONS, ROCHELLE  
Address: 300 GULF BLVD.  
City-St-Zip: BELLEAIR SHORES, FL 33786

Title: VP ( ) Delete  
Name: EMSLIE, RICHARD  
Address: 300 GULF BLVD.  
City-St-Zip: BELLEAIR SHORES, FL 33786

Title: SECT ( ) Delete  
Name: PARSONS, ROBERT W  
Address: 300 GULF BLVD.  
City-St-Zip: BELLEAIR SHORES, FL 33786

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PTD (X) Change ( ) Addition  
Name: ROBERT, CARR  
Address: 3750 GUNN HIGHWAY SUITE 109  
City-St-Zip: TAMPA, FL 33618

Title: VP (X) Change ( ) Addition  
Name: SPONTELLI, FRANK  
Address: 3750 GUNN HIGHWAY SUITE 109  
City-St-Zip: TAMPA, FL 33618

Title: SECT (X) Change ( ) Addition  
Name: GISCHEL, DAVID  
Address: 3750 GUNN HIGHWAY SUITE 109  
City-St-Zip: TAMPA, FL 33618

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: BOB CARR

PRES

11/05/2009

Electronic Signature of Signing Officer or Director

Date