

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000155

FILED
Mar 12, 2009
Secretary of State

Entity Name: THE PRESERVE AT COLONIAL SECTION II CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O INTEGRATED PROPERTY MGMT.
3435- 10TH STREET N., #201
NAPLES, FL 34103

New Principal Place of Business:

C/O SCHOO MANAGEMENT
9411-2 CYPRESS LAKE DR
FORT MYERS, FL 33919

Current Mailing Address:

C/O INTEGRATED PROPERTY MGMT.
3435- 10TH STREET N., #201
NAPLES, FL 34103

New Mailing Address:

C/O SCHOO MANAGEMENT
9411-2 CYPRESS LAKE DR
FORT MYERS, FL 33919

FEI Number: 20-3907874

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHIELDS, CHRISTOPHER J
1833 HENDRY STREET
PO DRAWER 1507
FORT MYERS, FL 33902 US

Name and Address of New Registered Agent:

GELLES, ROBERT E
9411-2 CYPRESS LAKE DR
FORT MYERS, FL 33919 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: ROBERT E GELLES

03/12/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BATTEGLIA, JACK
Address: 9603 HEMMINGWAY LANE, #4002
City-St-Zip: FORT MYERS, FL 33913

Title: D () Delete
Name: SATT, MARK
Address: 9603 HEMMINGWAY LANE #4007
City-St-Zip: FORT MYERS, FL 33913

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SEXTON, JIM
Address: 9617 HEMINGWAY LANE
City-St-Zip: FORT MYERS, FL 33913

Title: VP (X) Change () Addition
Name: MARUCCI, PHIL
Address: 9617 HEMINGWAY LANE
City-St-Zip: FORT MYERS, FL 33913

Title: S/T () Change (X) Addition
Name: JAROS, SUSAN
Address: 9595 HEMINGWAY LANE
City-St-Zip: FORT MYERS, FL 33913

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: ROBERT E GELLES

CAM

03/12/2009

Electronic Signature of Signing Officer or Director

Date