

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004442

FILED  
Apr 16, 2009  
Secretary of State

**Entity Name:** SANTA COLOMA GARDENS CONDOMINIUM ASSOCIATION INC.

**Current Principal Place of Business:**

3732 SW 7TH PL  
CAPE CORAL, FL 33914

**New Principal Place of Business:**

**Current Mailing Address:**

C/O ROSSMAN PROPERTY MGMT  
1104 SE 46TH LANE #2  
CAPE CORAL, FL 33904

**New Mailing Address:**

**FEI Number:** 20-8141233      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROSSMAN, MICHELLE CAM  
C/O ROSSMAN PROPERTY MGMT  
1104 SE 46TH LANE #2  
CAPE CORAL, FL 33178 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: BRU, RAFACI I  
Address: 7231 SW 63RD AVE., SUITE 200  
City-St-Zip: MIAMI, FL 33143

Title: SD (X) Delete  
Name: MORIERA, DOMINGO R  
Address: 7231 SW 63RD AVE., SUITE 200  
City-St-Zip: MIAMI, FL 33143

Title: TD (X) Delete  
Name: GONZALEZ, SILVIA  
Address: 7231 SW 63RD AVE., SUITE 200  
City-St-Zip: MIAMI, FL 33143

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

Title: PD (X) Change ( ) Addition  
Name: FERRER, GUILLERMO  
Address: 12440 SW 32ND AVE  
City-St-Zip: MIAMI, FL 33175

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

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: MICHELLE ROSSMAN, CAM

CAM

04/16/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date