

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jun 21, 2010
Secretary of State

DOCUMENT# N06000007396

Entity Name: CATALINA ISLES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044

New Mailing Address:

FEI Number: 20-8282274 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HART, JAMES W JR
C/O SENTRY MANAGEMENT, INC.
2180 W. SR 434, STE 5000
LONGWOOD, FL 327795044 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
Name: WILSON, ANN
Address: 2787 L B MCLEOD RD #A
City-St-Zip: ORLANDO, FL 32805

Title: VPD
Name: ELLIS, MARIAN
Address: 2791 L B MCLEOD RD #A
City-St-Zip: ORLANDO, FL 32805

Title: SD
Name: ABREU, MARINA
Address: 1637 E VINE ST STE 125
City-St-Zip: KISSIMMEE, FL 34744

Title: TD
Name: CASTRILLO, SERGIO
Address: 3550 POWERLINE RD
City-St-Zip: FT LAUDERDALE, FL 33309

Title: D
Name: WATERS, JEFFREY
Address: 3550 POWERLINE RD
City-St-Zip: FT LAUDERDALE, FL 33309

I hereby 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 all other like empowered.

SIGNATURE: ANN WILSON

PD

06/21/2010

Electronic Signature of Signing Officer or Director

_____ Date