

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000012346

**FILED**  
**Apr 24, 2011**  
**Secretary of State**

**Entity Name:** AMAZING GRACE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

5260 S LANDINGS DR #1706  
FORT MYERS, FL 33919

**New Principal Place of Business:**

**Current Mailing Address:**

5260 S LANDINGS DR #1706  
FORT MYERS, FL 33919

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

HAGAN, SAMUEL J IV  
1415 HENDRY STREET  
FORT MYERS, FL 33901 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: REITAN, J. CRAIG  
Address: 5260 S LANDINGS DR #1706  
City-St-Zip: FORT MYERS, FL 33919

Title: STD  
Name: REITAN, KAREN M  
Address: 5260 S LANDINGS DR #1706  
City-St-Zip: FORT MYERS, FL 33919

Title: D  
Name: GIBSON, RON  
Address: 5260 S LANDINGS DR #1706  
City-St-Zip: FORT MYERS, FL 33919

Title: VD  
Name: SHIRLEY, KEVIN  
Address: 5260 S LANDINGS DR #1706  
City-St-Zip: FORT MYERS, FL 33919

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:** J. CRAIG REITAN

PD

04/24/2011

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

\_\_\_\_\_  
Date