

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07763

FILED
Apr 20, 2009
Secretary of State

Entity Name: SUN CATCHER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

8306 LAUREL LAKES WAY
NAPLES, FL 34119

New Principal Place of Business:

Current Mailing Address:

8306 LAUREL LAKES WAY
NAPLES, FL 34119

New Mailing Address:

FEI Number: 20-5824529

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARGIE, MICHAEL S
8306 LAUREL LAKES WAY
NAPLES, FL 34119 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: P () Delete
Name: CAGGIANO, NICHOLAS
Address: 5392 16TH PL SW
City-St-Zip: NAPLES, FL 34116

Title: S () Delete
Name: COX, LINDA
Address: 920 BELVILLE BLVD
City-St-Zip: NAPLES, FL 34104

Title: T () Delete
Name: MORACZINCZYK, GABRIELE
Address: 5416 16TH PL SW
City-St-Zip: NAPLES, FL 34116

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ESTEVEZ, OMAR
Address: 5366 16TH PL SW
City-St-Zip: NAPLES, FL 34116

Title: S/T (X) Change () Addition
Name: FECHNER, SYLVIA
Address: 4141 8TH AVE SE
City-St-Zip: NAPLES, FL 34117

Title: VP (X) Change () Addition
Name: COOKE, TIMOTHY
Address: 5141 PALMETTO WOODS DR
City-St-Zip: NAPLES, FL 34119

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: OMAR ESTEVEZ

P

04/20/2009

Electronic Signature of Signing Officer or Director

Date