

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12920

FILED
Jan 19, 2010
Secretary of State

Entity Name: CINNAMON COVE TERRACE CONDOMINIUM III ASSOCIATION, INC.

Current Principal Place of Business:

6719 WINKLER ROAD
SUITE 200
FT MYERS, FL 33919 US

New Principal Place of Business:

Current Mailing Address:

C/O ALLIANT PROPERTY MANAGEMENT
6719 WINKLER RD STE 200
FORT MYERS, FL 33919

New Mailing Address:

FEI Number: 65-0022822 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ALLIANT PROPERTY MANAGEMENT
6719 WINKLER RD
STE 200
FORT MYERS, FL 33919 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: EXTON, EDWARD
Address: 11300 CARAVEL CR #309
City-St-Zip: FORT MYERS, FL 33908

Title: SD
Name: YASKULKA, CAROL ANN
Address: 11250 CARAVEL CIRCLE #303
City-St-Zip: FORT MYERS, FL 33908

Title: VPD
Name: BERK, SALESSA
Address: 11250 CARAVEL CIR #107
City-St-Zip: FORT MYERS, FL 33908

Title: TD
Name: KLOPFENSTEIN, AL
Address: 11250 CARAVEL CIR 202
City-St-Zip: FT. MYERS, FL 33908

Title: D
Name: STEADMAN, EARL
Address: 11300 CARAVEL CIR 204
City-St-Zip: FORT MYERS, FL 33908

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: AL KLOPFENSTEIN

TD

01/19/2010

Electronic Signature of Signing Officer or Director

Date