2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23341

FILED Apr 20, 2009 Secretary of State

Entity Name: THE COLONY HOMEOWNERS ASSOCIATION, INC.

Current P	rincipal Place of Business:	New Principal Place of Busin	ess:
DANIELS FORT MY	PKWY ERS, FL 33902 US	DANIELS PKWY FORT MYERS, FL 33912 U	S
Current Mailing Address: 3915 LEE BLVD LEHIGH ACRES, FL 33971 US		New Mailing Address: 21620 NORTH RIVER ROAD ALVA, FL 33920 US	
Name and	d Address of Current Registered Agent:	Name and Address of New Ro	egistered Agent:
3915 LEE LEHIGH A	I, EDWARD L SR BLVD CRES, FL 33971 US e named entity submits this statement for the purpo	MAROTIN, EDWARD L SR 21620 NORTH RIVER ROAD ALVA, FL 33920 US	r registered agent or both
	e of Florida.	se of changing its registered office of	registered agent, or both,
SIGNATU	RE:		04/20/2009
	Electronic Signature of Registered Agent		Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO O	FICERS AND DIRECTOR
Γitle: √ame: √ddress:	S AND DIRECTORS: P () Delete GRIBAUDO, SANDRA 7567 CAMERON CIRCLE FORT MYERS, FL 33912		FFICERS AND DIRECTOR
Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	P () Delete GRIBAUDO, SANDRA 7567 CAMERON CIRCLE	Title: () Change Name: Address: City-St-Zip:	
OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	P () Delete GRIBAUDO, SANDRA 7567 CAMERON CIRCLE FORT MYERS, FL 33912 VP () Delete RPINGLE, WILLIAM 13645 ADMIRAL COURT	Title: () Change Name: Address: City-St-Zip: Title: () Change Name: Address: City-St-Zip:	e () Addition
Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address:	P () Delete GRIBAUDO, SANDRA 7567 CAMERON CIRCLE FORT MYERS, FL 33912 VP () Delete RPINGLE, WILLIAM 13645 ADMIRAL COURT FORT MYERS, FL 33966 T () Delete CHADWICK, WILLIAM 13545 AMERICAN COLONY BLVD	Title: () Change Name: Address: City-St-Zip: Title: () Change Name: Address: City-St-Zip: Title: () Change Name: Address: City-St-Zip:	e () Addition

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: EDWARD L. MAROTI SR AGEN 04/20/2009