

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24285

FILED
Mar 17, 2009
Secretary of State

Entity Name: THE CARIBBEAN CONDOMINIUM MANAGEMENT ASSOCIATION, INC.

Current Principal Place of Business:

2425 S. ATLANTIC AVE.
DAYTONA BEACH SHORES, FL 32118 US

New Principal Place of Business:

Current Mailing Address:

2425 S. ATLANTIC AVE.
DAYTONA BEACH SHORES, FL 32118 US

New Mailing Address:

FEI Number: 59-2869070

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PECK, EDWIN W PRES
2425 S. ATLANTIC AVENUE
PH03
DAYTONA BEACH SHORES, FL 32118 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 () Delete
Name: PECK, EDWIN W PRES
Address: 2425 S. ATLANTIC AVENUE #PH3
City-St-Zip: DAYTONA BEACH SHORES, FL 32118 US

Title: AT () Delete
Name: DALIA, VESTA OFFICER
Address: 2425 S ATLANTIC AVE #1603
City-St-Zip: DAYTONA BEACH SHORES, FL 32118 US

Title: D () Delete
Name: HICKS, HAL D. OFFICER
Address: 2425 S. ATLANTIC AVE., PH 5
City-St-Zip: DAYTONA BEACH SHORES, FL 32118 US

Title: D () Delete
Name: MICARA, EDWARD SCRTRY
Address: 2425 S ATLANTIC AVE #407
City-St-Zip: DAYTONA BEACH SHORES, FL 32118 US

Title: TS () Delete
Name: HARDY, CHARLES TRSR
Address: 2425 S. ATLANTIC AVE., #105
City-St-Zip: DAYTONA BCH SHORES, FL 32118 US

Title: D (X) Delete
Name: HUBECK, CHRIS
Address: 2425 S ATLANTIC AVE #1504
City-St-Zip: DAYTONA BCH SHORES, FL 32118 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: HUBECK, CHRIS OFFICER
Address: 2425 S. ATLANTIC AVE., PH 5
City-St-Zip: DAYTONA BEACH SHORES, FL 32118 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: EDWIN W. PECK

PRES

03/17/2009

Electronic Signature of Signing Officer or Director

Date