

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24786

FILED
Apr 19, 2011
Secretary of State

Entity Name: MANATEE COVE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O AMERICAN CONDO MGMT
615 CAPE CORAL PKWY W 103
CAPE CORAL, FL 33914

New Principal Place of Business:

Current Mailing Address:

C/O AMERICAN CONDO MGMT
615 CAPE CORAL PKWY W 103
CAPE CORAL, FL 33914

New Mailing Address:

FEI Number: 65-0123167

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KASE, SUSAN M
C/O AMERICAN CONDOMINIUM MANAGEMENT
615 CAPE COAL PKWY W #103
CAPE CORAL, FL 33914 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: VP
Name: PAXTON, RUSSELL
Address: 4704 SW SANTA BARBARA PLACE 203A
City-St-Zip: CAPE CORAL, FL 33914

Title: PD
Name: MILLER, MIKE
Address: 4704 SW SANTA BARBARA PL 104A
City-St-Zip: CAPE CORAL, FL 33914

Title: ST
Name: SHAWYER, ALICE
Address: 4704 SW SANTA BARBARA 103
City-St-Zip: CAPE CORAL, FL 117863391

Title: D
Name: O'EHLE, ROBERT
Address: 4704 SW SANTA BARBARA PL 204
City-St-Zip: CAPE CORAL, FL 33914

Title: D
Name: EVANS, JEFFERY
Address: 123 SW 47TH TERR 201
City-St-Zip: CAPE CORAL, FL 33914

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: MIKE MILLER

PRES

04/19/2011

Electronic Signature of Signing Officer or Director

Date