

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25843

FILED  
Mar 28, 2012  
Secretary of State

**Entity Name:** CINNAMON COVE VILLAS IV CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O ISLAND MANAGEMENT  
711 TARPON BAY ROAD  
SANIBEL, FL 33957

**New Principal Place of Business:**

**Current Mailing Address:**

C/O ISLAND MANAGEMENT  
PO BOX 100  
SANIBEL, FL 33957

**New Mailing Address:**

**FEI Number:** 65-0114900

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MACKESY, STEVEN  
C/O ISLAND MANAGEMENT  
711 TARPON BAY ROAD  
SANIBEL, FL 33957 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: LABIANCA, DOROTHY  
Address: 16590 GINGER LANE #3249  
City-St-Zip: FORT MYERS, FL 33908

Title: VD  
Name: DEFONZO, ELENA  
Address: 16540 GINGER LANE #3198  
City-St-Zip: FORT MYERS, FL 33908

Title: STD  
Name: MAIKUT, MICHAEL  
Address: 16570 GINGER LANE #3217  
City-St-Zip: FORT MYERS, FL 33908

Title: D  
Name: HIBLER, GENE  
Address: 16600 GINGER LANE #3236  
City-St-Zip: FORT MYERS, FL 33908

Title: D  
Name: PAIGE, ELIZABETH  
Address: 16520 GINGER LANE #3209  
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: DOROTHY LABIANCA

PD

03/28/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date