

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28084

FILED
Apr 17, 2009
Secretary of State

Entity Name: THE CARRIAGE HOMES AT THE CROSSINGS OF BONITA BAY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

27180 BAYLANDING DR. STE
BONITA SPRINGS, FL 34135 US

New Principal Place of Business:

27180 BAYLANDING DR. STE 4
BONITA SPRINGS, FL 34135 US

Current Mailing Address:

42180 BAY LANDING DR. STE 4
BONITA SPRINGS, FL 34135 US

New Mailing Address:

27180 BAY LANDING DR. STE 4
BONITA SPRINGS, FL 34135 US

FEI Number: 65-0119662

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STERLING PROPERTY SERVICES
27180 BAY LANDING DR. STE 4
BONITA SPRINGS, FL 34135 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: VACCA, FRANK
Address: 3300 CROSSINGS COURT # 32
City-St-Zip: BONITA SPRINGS, FL

Title: STD () Delete
Name: UHLIG, SUSAN
Address: 3260 CROSSINGS COURT, #14
City-St-Zip: BONITA SPRINGS, FL 34134

Title: VD () Delete
Name: HAKES, DAVID
Address: 3280 CROSSINGS CT #23
City-St-Zip: BONITA SPRINGS, FL 34134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: HAKES, DAVID
Address: 3280 CROSSINGS CT. #23
City-St-Zip: BONITA SPRINGS, FL 34134

Title: DST (X) Change () Addition
Name: HILL, BRUCE
Address: 3280 CROSSINGS COURT, #22
City-St-Zip: BONITA SPRINGS, FL 34134

Title: DV (X) Change () Addition
Name: UHLIG, RICHARD
Address: 3260 CROSSINGS CT #14
City-St-Zip: BONITA SPRINGS, FL 34134

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: DAVID HAKES

DP

04/17/2009

Electronic Signature of Signing Officer or Director

Date