

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28532

FILED  
Apr 28, 2010  
Secretary of State

**Entity Name:** DAVE'S COURT CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O ROSSMAN PROPERTY MANAGEMENT  
1104 SE 46TH LANE #2  
CAPE CORAL, FL 33904 US

**New Principal Place of Business:**

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

**Current Mailing Address:**

C/O ROSSMAN PROPERTY MANAGEMENT  
1104 SE 46TH LANE #2  
CAPE CORAL, FL 33904 US

**New Mailing Address:**

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

**FEI Number:** 65-0556145

**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 CORAL PARKWAY 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: TD  
Name: FAVALE, JOSEPH  
Address: 1 PRESCOTT ST #302  
City-St-Zip: E BOSTON, MA 02128

Title: VPD  
Name: BAPTISTA, RICHARD  
Address: 24 SWAN AVE  
City-St-Zip: E BOSTON, MA 02128

Title: PD  
Name: SCOLARO, PETER  
Address: 12 PALERMO ST  
City-St-Zip: E BOSTON, MA 02128

Title: SD  
Name: TARANTINO, VICKI  
Address: 1005 SW 48TH TERRACE #3  
City-St-Zip: CAPE CORAL, FL 33914

Title: D  
Name: LONGO, PHIL  
Address: 4 JOSEPH RD  
City-St-Zip: REVERE, MA 02151

Title: D  
Name: YOUNG, CHIP  
Address: 1517 S WALNUT  
City-St-Zip: SPOKANE, WA 99203

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:** PETER SCOLARO

P

04/28/2010

Electronic Signature of Signing Officer or Director

Date