

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32999

FILED
Mar 09, 2009
Secretary of State

Entity Name: CINNAMON COVE TERRACE CONDOMINIUM VI ASSOCIATION, INC.

Current Principal Place of Business:

11500 CARAVEL CIRCLE
FT. MYERS, FL 33908 US

New Principal Place of Business:

Current Mailing Address:

13611 MCGREGOR BLVD.
STE. 6
FORT MYERS, FL 33919 US

New Mailing Address:

FEI Number: 65-0162830 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

APEX MANAGEMENT SERVICES
13611 MCGREGOR BLVD
FORT MYERS, FL 33919 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: D () Delete
Name: FORSTROM, HAROLD
Address: 11500 CARAVEL CIR. #4025
City-St-Zip: FORT MYERS, FL 33908

Title: SD () Delete
Name: MORGAN, WOODROW
Address: 11500 CARAVEL CIRCLE #4029
City-St-Zip: FORT MYERS, FL 33908

Title: T () Delete
Name: CONNORS, HELEN
Address: 11500 CARAVEL CIR. #4026
City-St-Zip: FORT MYERS, FL 33908

Title: P () Delete
Name: HARPER, MATTHEW
Address: 11500 CARAVEL CIR. #4030
City-St-Zip: FORT MYERS, FL 33908

Title: VD () Delete
Name: ROY, FERNAND
Address: 11500 CARAVEL CIR. #4013
City-St-Zip: FORT MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LICZWEK, ELMER
Address: 11500 CARAVEL CIR. #4010
City-St-Zip: FORT MYERS, FL 33908

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

Title: TD (X) Change () Addition
Name: CONNORS, HELEN
Address: 11500 CARAVEL CIR. #4026
City-St-Zip: FORT MYERS, FL 33908

Title: PD (X) Change () Addition
Name: HARPER, MATTHEW
Address: 11500 CARAVEL CIR. #4030
City-St-Zip: FORT MYERS, FL 33908

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: HELEN CONNERS

TD

03/09/2009

Electronic Signature of Signing Officer or Director

Date