

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36207

FILED
Apr 24, 2009
Secretary of State

Entity Name: MAINSAIL II CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1315 MAINSAIL DR.
NAPLES, FL 34114 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1195
MARCO, FL 34146

New Mailing Address:

FEI Number: 65-0167453

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRESSEL, JAMIE
1104 W. COLLIER BLVD.
MARCO ISLAND, FL 34145 US

Name and Address of New Registered Agent:

WILL, JEFFREY MANAGER
601 ELKCAM CIRCLE
B-16
MARCO ISLAND, FL 34145 US

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: JEFFREY WILL

04/24/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: COLE, EARL
Address: 202 BODY'S NECK ROAD
City-St-Zip: CHESTER, MD 21619

Title: STD () Delete
Name: SZEDELY, NICK
Address: 1325 MAINSAIL DRIVE, #1215
City-St-Zip: NAPLES, FL 34114

Title: PD () Delete
Name: NOBLE, BOB
Address: 1325 MAINSAIL DR #1202
City-St-Zip: NAPLES, FL 34114

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: WETZEL, D. MERLE
Address: 205 CRESTMONT DR.
City-St-Zip: SHIPPENVILLE, PA 16254-400

Title: STD (X) Change () Addition
Name: SZEDELY, LASLO
Address: 1325 MAINSAIL DRIVE, #1215
City-St-Zip: NAPLES, FL 34114

Title: PD (X) Change () Addition
Name: NOBLE, ROBERT
Address: 1325 MAINSAIL DR #1202
City-St-Zip: NAPLES, FL 34114

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: ROBERT NOBLE

P

04/24/2009

Electronic Signature of Signing Officer or Director

Date