

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39947

FILED
Apr 22, 2009
Secretary of State

Entity Name: CABANAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1 BEACHSIDE DR
TOWN OF ORCHID, FL 32963 US

New Principal Place of Business:

C/O VISTA PROPERTIES MANAGEMENT
100 VISTA ROYALE BLVD
VERO BEACH, FL 32962 US

Current Mailing Address:

1 BEACHSIDE DR
TOWN OF ORCHID, FL 32963 US

New Mailing Address:

C/O VISTA PROPERTIES MANAGEMENT
100 VISTA ROYALE BLVD
VERO BEACH, FL 32962 US

FEI Number: 65-0232648

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCKINNON, CHARLES W
3055 CARDINAL DR. SUITE 302
VERO BEACH, FL 32963 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: P () Delete
Name: DRUCKER, ALAN
Address: 810 PEMBROKE CRT
City-St-Zip: VERO BEACH, FL 32963

Title: S () Delete
Name: SMITH, BOWEN
Address: 398 INDIES DR
City-St-Zip: VERO BEACH, FL 32963

Title: T () Delete
Name: WALKER, WILLIAM
Address: 100 BEACHSIDE DR 1010
City-St-Zip: VERO BEACH, FL 32963

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: ALAN DRUCKER

P

04/22/2009

Electronic Signature of Signing Officer or Director

Date