

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44240

FILED
Apr 10, 2009
Secretary of State

Entity Name: CINNAMON LAKE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

776 64TH AVENUE NORTH
SAINT PETERSBURG, FL 33702 US

New Principal Place of Business:

8326 17TH WAY NORTH
SAINT PETERSBURG, FL 33702 US

Current Mailing Address:

776 64TH AVENUE NORTH
SAINT PETERSBURG, FL 33702 US

New Mailing Address:

8326 17TH WAY NORTH
SAINT PETERSBURG, FL 33702 US

FEI Number: 59-2041512

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEONARD, BARBARA G
776 64TH AVENUE NORTH
SAINT PETERSBURG, FL 33702 US

Name and Address of New Registered Agent:

BRUDNY, MICHAEL J
200 N PINE AVENUE
SUITE A
OLDSMAR, FL 34677 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: MICHAEL J BRUDNY

04/10/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: REYNOLDS, JOSEPH
Address: 8371 17TH STREET NORTH
City-St-Zip: ST PETERSBURG, FL 33702

Title: TD () Delete
Name: NURSE, PATRICIA
Address: 8334 17TH WAY NORTH
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: SD () Delete
Name: GOING, MIRIAM
Address: 8465 17TH STREET NORTH
City-St-Zip: ST PETERSBURG, FL 33702

Title: VD () Delete
Name: SHAW, LORRAINE
Address: 8373 17TH STREET NORTH
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: PD () Delete
Name: JOHNSON, JULIAN
Address: 8434 17TH STREET NORTH
City-St-Zip: SAINT PETERSBURG, FL 33702

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change () Addition
Name: LIPPERT, CYNTHIA
Address: 8415 17TH STREET NORTH
City-St-Zip: ST PETERSBURG, FL 33702

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: JULIAN JOHNSON

PD

04/10/2009

Electronic Signature of Signing Officer or Director

Date