## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N49243

FILED Feb 20, 2009 Secretary of State

Entity Name: GREENBRIAR II AT BONITA BAY CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:** 

**New Principal Place of Business:** 

4130 BAYHEAD DR

%GULF BREEZE MGMT. SVCS. OF SW FL, LLC

#306

8910 TERRENE COURT, #200 BONITA SPRINGS, FL 34135 US

BONITA SPRINGS, FL 34134 US

**Current Mailing Address:** 

New Mailing Address:

4130 BAYHEAD DR.

%GULF BREEZE MGMT. SVCS. OF SW FL, LLC

#306 BONITA SPRINGS, FL 34134 8910 TERRENE COURT, #200 BONITA SPRINGS, FL 34135 US

FEI Number: 65-0405887 FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MURRAY, MARTIN

WEIDNER, RALPH L

4130 BAYHEAD DR.

%GULF BREEZE MGMT. SVCS., OF SW FL, LLC

#204

8910 TERRENE COURT, #200

BONITA SPRINGS, FL 34134 US

BONITA SPRINGS, FL 34135 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: RALPH L. WEIDNER

City-St-Zip:

Electronic Signature of Registered Agent

US

02/20/2009 Date

**OFFICERS AND DIRECTORS:** 

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

() Delete

MCINTYRE, CARRY J Name: 4130 BAYHEAD DR., #306 Address: City-St-Zip: BONITA SPRINGS, FL 34134

Title: STD () Delete MURRAY, MARTIN Name: Address: 4130 BAYHEAD DR., #204

BONITA SPRINGS, FL 34134

Title: VPD () Delete LANGEN, FRED Name: 4130 BAYHEAD DR., #202 Address: City-St-Zip: BONITA SPRINGS, FL 34134

Name:

Address:

City-St-Zip:

4130 BAYHEAD DR., #304 BONITA SPRINGS, FL 34134

WHELAN, C. DOUGLAS

Title: (X) Change ( ) Addition Name: JENKINS, TERRENCE N

Address: 4130 BAYHEAD DR., #201 City-St-Zip: BONITA SPRINGS, FL 34134

Title: SD (X) Change ( ) Addition

Name: GIMBEL, MARI S 4130 BAYHEAD DR., #105 Address: City-St-Zip: BONITA SPRINGS, FL 34134

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: C. DOUGLAS WHELAN

**PRES** 

02/20/2009

Date