

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49782

FILED  
Mar 25, 2009  
Secretary of State

Entity Name: RUBICON CONDOMINIUM ASSOCIATION, INC.

## Current Principal Place of Business:

3815 SW 11TH PL  
#101  
CAPE CORAL, FL 33904 US

## New Principal Place of Business:

## Current Mailing Address:

P O BOX 100744  
CAPE CORAL, FL 33910 US

## New Mailing Address:

FEI Number: 65-0349211      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

POWELL, WILLIAM M.  
2002 DEL PRADO BLVD. #105  
CAPE CORAL, FL 33990 US

## Name and Address of New Registered Agent:

GULF COAST VACATION PROPERTY MANAGEMENT  
1705 SW 51ST TERRACE  
CAPE CORAL, FL 33914 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: SASCHA WEBER

03/25/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SAGE, DAVE  
Address: 1217 E CAPE CORAL PKWY #330  
City-St-Zip: CAPE CORAL, FL 33904

Title: D ( ) Delete  
Name: MACK, MONIKA  
Address: 3815 SE 110TH PL #102  
City-St-Zip: CAPE CORAL, FL 33904

Title: SDTD ( ) Delete  
Name: MACK, MONIKA  
Address: 3815 SE 11TH PL, #102  
City-St-Zip: CAPE CORAL, FL 33904

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition  
Name: DOUT, JERRY  
Address: 11432 EAGLEWAY  
City-St-Zip: BRIGHTON, MI 48114

Title: P (X) Change ( ) Addition  
Name: MACK, MONIKA  
Address: HEIMGARTEN STRASSE 7  
City-St-Zip: WEILHEIM - GERMANY, D 82362 D

Title: SDTD (X) Change ( ) Addition  
Name: MACK, MONIKA  
Address: HEIMGARTEN STRASSE 7  
City-St-Zip: WEILHEIM - GERMANY, D 82362 D

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: MONIKA MACK

P

03/25/2009

Electronic Signature of Signing Officer or Director

Date