

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50577

FILED  
Mar 23, 2005  
Secretary of State

**Entity Name:** COURTYARD LANDINGS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

3160 MATECUMBE KEY RD.  
PUNTA GORDA, FL 33955 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O BENSON'S INC  
12650 WHITEHALL DR  
FT MYERS, FL 33907 US

**New Mailing Address:**

**FEI Number:** 65-0389057      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WHITE, ALAN  
15510 BURNT STORE RD  
PUNTA GORDE, FL 33955 US

**Name and Address of New Registered Agent:**

BENSON, MARK R  
12650 WHITEHALL DR  
FORT MYERS, FL 33907 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: MARK R BENSON

03/23/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: HEMPILL, MARILYN  
Address: 1307 ISLAMORADA BLVD  
City-St-Zip: PUNTA GORDA, FL 33955

Title: VSD ( ) Delete  
Name: GRAVES, RONALD  
Address: 1309 ISLAMORADA BLVD  
City-St-Zip: PUNTA GORDA, FL 33955

Title: TD ( ) Delete  
Name: RUE, MARY  
Address: 1201 ISLOMORADA BLVD  
City-St-Zip: PUNTA GORDA, FL 33955

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: BACON, SCOTT  
Address: 1309 ISLAMORADA BLVD  
City-St-Zip: PUNTA GORDA, FL 33955

Title: VD (X) Change ( ) Addition  
Name: CARILLO, LOUIE  
Address: 1503 ISLAMORADA BLVD  
City-St-Zip: PUNTA GORDA, FL 33955

Title: STD (X) Change ( ) Addition  
Name: LAMBERTI, MARY  
Address: 1203 ISLAMORADA BLVD  
City-St-Zip: PUNTA GORDA, FL 33955

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SCOTT BACON

PRES

03/23/2005

Electronic Signature of Signing Officer or Director

Date