2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N93000001981

TI FILED
Oct 08, 2009
Secretary of State

Entity Name: COURTYARD LANDINGS II CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O BENSON'S, INC. 6719 WINKLER RD. STE. 200 12650 WHITEHALL DRIVE FT. MYERS, FL 33919 FT. MYERS, FL 33907

Current Mailing Address:

C/O BENSON'S, INC. 6719 WINKLER RD. STE. 200 12650 WHITEHALL DRIVE FT. MYERS, FL 33919

FT. MYERS, FL 33907

FEI Number: 59-3236773 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

New Mailing Address:

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

VANDALL, BONITA D

12650 WHITEHALL DR

FORT MYERS, FL 33907 US

ALLIANT PROPERTY MANAGEMENT, LLC
6719 WINKLER RD. STE. 200
FORT MYERS, FL 33919 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: MILLIE STROHM, AGENT 10/08/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ()Delete Title: ()Change ()Addition

 Name:
 MORELLO, RONALD
 Name:

 Address:
 1304 ISLAMORADA BLVD
 Address:

 City-St-Zip:
 PUNTA GORDA, FL 33955
 City-St-Zip:

Title: STD () Delete Title: () Change () Addition

 Name:
 GALPIN, JUDY
 Name:

 Address:
 1506 ISLAMORRADA BLVD
 Address:

 City-St-Zip:
 PUNTA GORDA, FL 33955
 City-St-Zip:

Title: VD () Delete Title: () Change () Addition

 Name:
 SPURLOCK, GLENN
 Name:

 Address:
 1504 ISLAMORADA BLVD
 Address:

 City-St-Zip:
 PUNTA GORDA, FL 33955
 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: RONALD MORELLO PD 10/08/2009