2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004332

FILED Apr 15, 2009 Secretary of State

Entity Name: CORAL VILLAS CONDOMINIUM ASSOCIATION, INC.

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

C/O ROSSMAN REALTY PROP. MGMT., LLC 879 SE 46TH LANE

1104 SE 46TH LANE #2 CAPE CORAL, FL 33904 US

CAPE CORAL, FL 33904

New Mailing Address: Current Mailing Address:

C/O ROSSMAN REALTY PROP. MGMT., LLC 1104 SE 46TH LANE #2 CAPE CORAL, FL 33904 US

FEI Number: 65-0588628 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:

ROSSMAN, MICHELLE CAM ROSSMAN REALTY PROP. MGMT.,LLC 1104 SE 46TH LANE #2 CAPE CORAL, FL 33904 US

OFFICERS AND DIRECTORS:

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:

Electronic Signature of Registered Agent Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete POLYDOROFF, STEVE POLYDOROFF, STEVE Name: Name: 5609 DEL RIO CT Address: 879 SE 46TH LANE #5 Address:

City-St-Zip: CAPE CORAL, FL 33904 US City-St-Zip: CAPE CORAL, FL 33904 US

Title: VPD () Delete Title: STD (X) Change () Addition ZIEMSKI, JOHN Name: ZIEMSKI, JOHN Name:

Address: 4344 NW 27TH TERRACE Address: 4344 NW 27TH TERRACE City-St-Zip: CAPE CORAL, FL 33993 US City-St-Zip: CAPE CORAL, FL 33993 US

Title: () Delete Title: (X) Change () Addition

ZIEMSKI, JOE ZIEMSKI, JOE Name: Name: 454 NW 39TH AVENUE Address: 1137 SE 2ND TERR Address: City-St-Zip: CAPE CORAL, FL 33904 US City-St-Zip: CAPE CORAL, FL 33993 US

Title: () Delete Title: VPD () Change (X) Addition

Name: Name: SCOPA, MARIE 300 RAVANNA LANE Address: Address: City-St-Zip: City-St-Zip: GREENVILLE, SC 29607

Title: () Delete Title: () Change (X) Addition

HARDMAN, JOHN Name: Name: 855 HINMAN 611 Address: Address: City-St-Zip: City-St-Zip: EVANSTON, IL 60202

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: MICHELLE ROSSMAN, CAM CAM 04/15/2009