

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005117

FILED
Jan 28, 2009
Secretary of State

Entity Name: CALOOSA POINT II PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

409 E COLLEGE AVE
RUSKIN, FL 33570

New Principal Place of Business:

Current Mailing Address:

P O BOX 1058
RUSKIN, FL 33575

New Mailing Address:

FEI Number: 59-3294447

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRIMMER, KATHY
409 E COLLEGE AVENUE
RUSKIN, FL 33570 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: ST () Delete
Name: MONSON, JAMES
Address: 712 WINTER BROOKE WAY
City-St-Zip: SUN CITY CENTER, FL 33573

Title: VP () Delete
Name: REEVE, CHARLES
Address: 720 WINTER BROOKE WAY
City-St-Zip: PENSACOLA, FL 32573

Title: D () Delete
Name: SULFRIAN, JOACHIM
Address: 714 WINTER BROOKE WAY
City-St-Zip: SUN CITY CENTER, FL 33573

Title: P () Delete
Name: GEISLER, WALTER
Address: 704 WINTERBROOKE WAY
City-St-Zip: SUN CITY CENTER, FL

Title: D () Delete
Name: TREFREN, MICHAEL
Address: 719 WINTER BROOKE WAY
City-St-Zip: SUN CITY CENTER, FL 33573

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MONSON, JAMES
Address: 712 WINTER BROOKE WAY
City-St-Zip: SUN CITY CENTER, FL 33573

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change () Addition
Name: SULFRIAN, JOACHIM
Address: 714 WINTER BROOKE WAY
City-St-Zip: SUN CITY CENTER, FL 33573

Title: D (X) Change () Addition
Name: BRUBAKER, JAMES
Address: 2304 PIPER GLEN COURT
City-St-Zip: SUN CITY CENTER, FL 33573

Title: () Change () Addition
Name:
Address:
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: JAMES MONSON

P

01/28/2009

Electronic Signature of Signing Officer or Director

Date