2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001597

FILED Apr 09, 2009 Secretary of State

Entity Name: VICTORIA MANOR CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: C/O REALTY SERVICES 708 VICTORIA DRIVE 2525 PARKWAY ST CAPE CORAL, FL 33904 US FORT MYERS, FL 33901 US **New Mailing Address: Current Mailing Address:** C/O REALTY SERVICES 2525 PARKWAY ST FORT MYERS, FL 33901 US FEI Number: 59-1160480 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: REALTY SERVICES 2525 PARKWAY ST FORT MYERS, FL 33901 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition HANSON, ROGER Name: Name: 708 VICTORIA DR. #212 Address: Address: City-St-Zip: CAPE CORAL, FL 33904 US City-St-Zip: Title: () Delete Title: (X) Change () Addition WELLENS, GERALD A Name: WELLENS, GERALD A Name: Address: 4248 MONROE RD Address: 708 VICTORIA DR #111 City-St-Zip: DE PERE, WI 54115 US City-St-Zip: CAPE CORAL, FL 33904 US Title: () Delete Title: (X) Change () Addition MIKALSEN, ARTHUR BRUNO, GARY Name: Name: Address: 708 VICTORIA DR #203 Address: 708 VICTORIA DR #202 City-St-Zip: CAPE CORAL, FL 33904 US City-St-Zip: CAPE CORAL, FL 33904 US Title: () Delete Title: (X) Change () Addition MCLAUGHLIN, BARRY Name: Name: MCLAUGHLIN, BARRY 708 VICTONA DR., #108 708 VICTONA DR., #108 Address: Address: City-St-Zip: CAPE CORAL, FL 33904 City-St-Zip: CAPE CORAL, FL 33904 Title: () Delete Title: (X) Change () Addition MESCH, BEVERLY MESCH, BEVERLY Name: Name: 708 VICTONA DR., #104 708 VICTONA DR., #104 Address: Address: City-St-Zip: CAPE CORAL, FL 33904 City-St-Zip: CAPE CORAL, FL 33904

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: ROGER HANSON T 04/09/2009