2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# N97000004921

Entity Name: PUESTA DEL LAGO AT LAS BRISAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O RESORT MANAGEMENT
2685 HORSESHOE DRIVE, SOUTH, SUITE #215
NAPLES, FL 34104 US

New Principal Place of Business:

Current Mailing Address:

C/O RESORT MANAGEMENT
2685 HORSESHOE DRIVE, SOUTH, SUITE #215
NAPLES, FL 34104 US

New Mailing Address:

FEI Number: 65-0820646 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BUDGINS, ROBERT J
8980 PALMAS GRANDES BLVD.
#201
BONITA SPRINGS, FL 34135 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: P ( ) Delete
Name: BUDGINS, ROBERT
Address: 8980 PALMAS GRANDES BLVD., #201
City-St-Zip: BONITA SPRINGS, FL 34135

Title: T ( ) Delete
Name: SESEN, PETER
Address: 8970-102 PALMAS GRANDES BLVD
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VP ( ) Delete
Name: JOHNSON, RUTH
Address: 9000 PALMAS GRANDES BLVD #101
City-St-Zip: BONITA SPRINGS, FL 34135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: BRYCE, STUART
Address: 28050-202 PALMAS GRANDES BLVD
City-St-Zip: BONITA SPRINGS, FL 34135

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: ROBERT BUDGINS P 04/15/2009
Electronic Signature of Signing Officer or Director Date