2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006034

FILED Apr 02, 2009 Secretary of State

Entity Name: MANATEE RESORT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	F SHORE DRI\ FL 34108	Æ			
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
SUITE 10	.F SHORE DRI\) FL 34108	/E			
El Number	: 59-3537450	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
999 VANE SUITE 50	& POLIAKOFF, DERBILT BEACI 1 FL 34108 US				
	e named entity s e of Florida.	ubmits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,	
SIGNATU	RE:				
				-	
	Electron	ic Signature of Registered Age	ent	Date	
OFFICER	Electron S AND DIREC				
DFFICER Fitle: Name: Address: Dity-St-Zip:	S AND DIREC	TORS: Delete CK ANSETT		Date GES TO OFFICERS AND DIRECTORS () Change () Addition	
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Fitle: Name: Address:	VP () COWELL, CHUC 31104 NARRAG BAY VILLAGE, C D () LUCA, JOHN 1786 CHARM C ROCHESTER, N P () TRAIN, CHARLE	Delete CK ANSETT DH 44140 Delete T 11 48306 Delete ES CROSSNECK RD	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	GES TO OFFICERS AND DIRECTORS () Change () Addition	
Title: Name: Nddress: Dity-St-Zip: Title: Name: Nddress: Dity-St-Zip: Title: Name: Nddress:	S AND DIRECTORY VP () COWELL, CHUC 31104 NARRAGE BAY VILLAGE, CO LUCA, JOHN 1786 CHARM CO ROCHESTER, N P () TRAIN, CHARLE P.O. BOX 43 6 CO MIRROR LAKE, S () SMITH, PETE	Delete CK ANSETT CH 44140 Delete T II 48306 Delete CS CROSSNECK RD NH 03853 Delete Delete	ADDITIONS/CHANC Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	GES TO OFFICERS AND DIRECTORS () Change () Addition () Change () Addition	

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: CHARLES TRAIN P 04/02/2009