

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001607

FILED
Apr 29, 2009
Secretary of State

Entity Name: SANTIVA PLAZA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

15670 MCGREGOR BLVD
#106
FT. MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

15670 MCGREGOR BLVD
#106
FT. MYERS, FL 33908

New Mailing Address:

FEI Number: 65-0908950

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GALA, JOSEPH A
14880 DAVID DR.
FT. MYERS, FL 33908 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: PD () Delete
Name: GALA, JOSEPH A
Address: 14880 DAVID DR.
City-St-Zip: FT. MYERS, FL 33908

Title: VD () Delete
Name: JASINSKI, STANLEY A
Address: 138 CRESCENT DR.
City-St-Zip: FT. MYERS, FL 33908

Title: SD () Delete
Name: GALA, ROSE E
Address: 14880 DAVID DR.
City-St-Zip: FT. MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: STANLEY JASINSKI

VD

04/29/2009

Electronic Signature of Signing Officer or Director

Date