

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004308

FILED
Mar 20, 2009
Secretary of State

Entity Name: VERANDA VI AT FAIRWAY ISLE ASSOCIATION, INC.

Current Principal Place of Business:

12734 KEAWOOD LN
52
FORT MYERS, FL 33907

New Principal Place of Business:

12734 KENWOOD LN
SUITE 49
FORT MYERS, FL 33907

Current Mailing Address:

12764 KENWOOD LANE
SUITE 49
FT. MYERS, FL 33907

New Mailing Address:

12734 KENWOOD LN
SUITE 49
FORT MYERS, FL 33907

FEI Number: 65-0939786

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TROPICAL ISLES MANAGEMENT SERVICES
12734 KENWOOD LN., STE 52
FORT MYERS, FL 33907 US

Name and Address of New Registered Agent:

TROPICAL ISLES MANAGEMENT SERVICES
12734 KENWOOD LN., STE 49
FORT MYERS, FL 33907 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:

03/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: HANSON, RONALD
Address: 10260 WASHINGTON PALM WAY
City-St-Zip: FT. MYERS, FL 33966

Title: P () Delete
Name: MCNEIL, KENNETH
Address: 10270 WASHINGTON PALM WAY, APT. 2216
City-St-Zip: FORT MEYERS, FL 33966

Title: T () Delete
Name: WOOD, ALAN
Address: 1003 OAK GROVE CT
City-St-Zip: VALPARAISO, IN 46383

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: LEHMAN, KEN
Address: 10260 WASHINGTONIA PALM #2124
City-St-Zip: FORT MYERS, FL 33966

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: RON HANSON

VP

03/20/2009

Electronic Signature of Signing Officer or Director

Date