

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758649

FILED
Feb 24, 2005
Secretary of State

Entity Name: CLIPPER BAY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O BENSON'S, INC.
12650 WHITEHALL DR
FORT MYERS, FL 33907 US

New Principal Place of Business:

Current Mailing Address:

C/O BENSON'S, INC.
12650 WHITEHALL DR
FORT MYERS, FL 33907 US

New Mailing Address:

FEI Number: 59-2168289 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENSON, MARK R
BENSON'S, INC.
12650 WHITEHALL DR
FORT MYERS, FL 33907 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: D () Delete
Name: SEGROVES, JAY W
Address: 4647 SE 17TH PL #102
City-St-Zip: CAPE CORAL, FL 33904

Title: TD () Delete
Name: BLANK, NEIL
Address: 4703 SE 17 PLACE #305
City-St-Zip: CAPE CORAL, FL 33904

Title: SD () Delete
Name: MELSON, MARY
Address: 4703 SE 17 PLACE #103
City-St-Zip: CAPE CORAL, FL 33904

Title: VD () Delete
Name: HALABY, LYNN
Address: 4647 SE 17 PLACE #301
City-St-Zip: CAPE CORAL, FL 33904

Title: PD () Delete
Name: MAHIGAN, RICHARD
Address: 4647 SW 17 PLACE #305
City-St-Zip: CAPE CORAL, FL 33904

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:

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 for the exemption stated in Section 119.07(3)(i), 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: RICHARD MAHIGAN

PRES

02/24/2005

Electronic Signature of Signing Officer or Director

_____ Date