

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 09, 2007 8:00 am
Secretary of State

03-09-2007 90006 006 ****61.25

DOCUMENT # 759497			
1. Entity Name THE SUZANNE CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 855 KETCH DR #104 NAPLES FL 34103 US		Mailing Address 2335 9TH ST. N. SUITE #505 NAPLES FL 34103 US	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent GULF VIEW PROPERTY MANAGEMENT 2335 9TH STREET STE 505 NAPLES FL 34103		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
8. 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. I am familiar with, and accept the obligations of registered agent.		8. 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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE _____		DATE _____	
Signature, typed or printed name of registered agent and title if applicable		(NOTE: Registered Agent signature required when reinstating)	



1st MOORE CR2E037 (10/06)

4. FEI Number **59-2167858** Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

FILE NOW: FEE IS \$61.25 Due By May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY ST ZIP	VPD JONES, FRED 855 KETCH DRIVE #204 NAPLES FL 34103 ☒ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	VPD Murphy, Geoffrey 825 Ketch Drive #202 Naples, FL 34103 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	D ACAGON, JOSE 825 KETCH DR #300 NAPLES FL 34103 ☒ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	D Mitchell, Roger 855 Ketch Drive #105 Naples, FL 34103 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	S CULLEN, MARY JANE M 825 KETCH DR #101 NAPLES FL 34103 ☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	SD ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	D THOMAS, NEVIN 825 KETCH DR. #203 NAPLES FL 34103 ☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	PD ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	PD WHITE, ROBERT 855 KETCH DRIVE 207 NAPLES FL 34103 ☒ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	D Nickle, Diana 855 Ketch Drive #206 Naples, FL 34103 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	TD LONDON, GLEN 855 KETCH DRIVE #107 NAPLES FL 34103 ☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **3/1/07 347262/1/64**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #