


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 21, 2008 8:00 am**  
**Secretary of State**

04-21-2008 90101 014 \*\*\*\*61.25

<b>DOCUMENT # 764501</b>			
1. Entity Name THE NANCY LANE ASSOCIATION, INC.			
Principal Place of Business 35 NANCY LANE FORT MYERS BEACH, FL 33931		Mailing Address 35 NANCY LANE FORT MYERS BEACH, FL 33931	
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
04092008		Chg-NP	CR2E037 (12/06)
4. FEI Number 59-2184588		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
NEWPORT, PATRICIA 30 NANCY LANE FORT MYERS BEACH, FL 33931		Name <i>CHARLES O'DONNELL</i> Street Address (P.O. Box Number is Not Acceptable) <i>34 NANCY LANE</i> <i>FT MYERS BEACH, FL</i> <i>33931</i> City <i>FL</i> Zip Code	
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 <i>Charles E. O'Donnell</i>		DATE <i>4-18-08</i>	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)		DATE	
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FOGIE, LARRY 72 NANCY LN FORT MYERS BEACH, FL 33931 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JANET HLADIK 1595 MAIN ST FT MYERS BEACH, FL 33931 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD NEWPORT, PATRICIA 30 NANCY LN FORT MYERS BEACH, FL 33931 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PETERSON, JERI 33 NANCY LN FORT MYERS BEACH, FL 33931 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	NILS MINER 17 NANCY LANE FT MYERS BEACH, FL 33931 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HART, JULIE 15 NANCY LN FORT MYERS BEACH, FL 33931 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TO CHARLES O'DONNELL 34 NANCY LANE FT MYERS BEACH, FL 33931 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HLADIK, JAN 73 NANCY LN FORT MYERS BEACH, FL 33931 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LOU VOLTAREL 71 NANCY LANE FT MYERS BEACH, FL 33931 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HONISCH, EVA 72 NANCY LN FORT MYERS BEACH, FL 33931 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 817, 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: <i>Charles E. O'Donnell</i>		DATE: <i>4-18-08</i> 239.463.2261	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

ATTACHMENT

400 75987

Attachment

DOCUMENT # 764501  
THE NANCY LANE ASSOCIATION, INC.

7<sup>th</sup> Board Member

TITLE	D
NAME	KUHNEL, KARIN
STREET ADDRESS	7 NAMCY LANE
CUITY-ST-ZIP	FORT MYERS BEACH FL 33931