2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 20, 2005 8:00 am
Secretary of State
04-20-2005 90328 007 ****61.25

DOCUMENT # N01000001130

1. Entity Name

RADIO SQUARE COMMERCIAL CONDMINIUM ASSOCIATION, INC.

50039644

1st MOORE CR2E037 (10/04)

Principal Place of Business	Mailing Address
4000 BAYSHORE DR, STE A NAPLES FL 34112	4000 BAYSHORE DR, STE A NAPLES FL 34112

2. Principal Place of Business	3. Mailing Address
Anchor Associates, Inc	Anchor Associates, Inc
Suite, Apt. #, etc. 3940 Radio Rd Ste 111	Suite, Apt. #, etc. 3940 Radio Rd, Ste 111
City & State Naples FL	City & State Naples, FL
Zip 34104 Country USA	Zip 34104 Country USA

4. FEI Number 52-2314785 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HORBAL, DALE 3940 RADIO RD NAPLES FL 34104	Name: Anchor Associates, Inc SHIRLEY HINGSTON Street Address (P.O. Box Number is Not Acceptable): 3940 Radio Rd. Ste 111 City: Naples FL Zip Code: 34104

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: Shirley Hingston — Shirley Hingston — 4-15-05
Signature, typed or printed name of registered agent, and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$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	D CARTER, JENNY 3940 RADIO RD, STE 102 NAPLES FL 34104	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HORBEL, DALE 3940 RADIO RD., STE 101 NAPLES FL 34104	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Thomas Scholten 3940 Radio Rd 112 Naples Fl 34103 ☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ZORN, GREG 3940 RADIO RD, STE 111 NAPLES FL 34104	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	William E AVERY 2200 KINGFISH RD NAPLES, FL 34102 ☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D THAMAS, KILLEN 3940 RADIO RD., STE 107 NAPLES FL 34104	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	KATHLEEN AVERY 2200 Kingfish rd Naples, FL 34102 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BRIGHT, TREVER 3940 RADIO RD., STE 106 NAPLES FL 34104	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	JAMES E LAVINSKI 3940 RADIO RD #111 NAPLES, FL 34104 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~KATHLEEN AVERY~~ ~~2200 KINGFISH RD~~ ~~NAPLES, FL 34102~~ ☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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: James E Lavinski, DIRECTOR — 4/4/05 — 239 649-6357
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #