2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004479

FILED Jan 04, 2008 Secretary of State

Entity Name: LA SCALA AT THE COLONY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: LA SCALA THE COLONY CONDO 5051 PELICAN COLONY BL BONITA SPRINGS, FL 34134 **New Mailing Address: Current Mailing Address:** 5051 PELICAN COLONY BLVD BONITA SPRINGS, FL 34134 FEI Number: 38-3682329 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LOIACONO, JOSEPH 5051 PELICAN COLONY BL BONITA SPRINGS, FL 34134 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition FENTIMAN, ANDREW Name: Name: 5051 PELICAN COLONY BLVD #603 Address: Address: City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: Title: () Delete Title: () Change () Addition Name: MCGARVEY, JOHN Name: Address: 5051 PELICAN COLONY BL #1904 Address: City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: Title: () Delete Title: (X) Change () Addition RYAN, FRANK Name: ROONEY, SHAWN Name: 5051 PELICAN COLONY BL #1604 5051 PELICAN COLONY BL #1704 Address: Address: City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: BONITA SPRINGS, FL 34134 Title: TR () Delete Title: () Change () Addition Name: FRENCH, JOSEPH Name: 5051 PELICAN COLONY BL #1502 Address: Address: City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: Title: () Delete Title: (X) Change () Addition ROONEY, SHAWN BESIKOF, MARSHALL Name: Name: 5051 PELICAN COLONY BL #1704 5051 PELICAN COLONY BL #402 Address: Address: City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: BONITA SPRINGS, FL 34134

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: BESIKOF, MARSHALL S 01/04/2008