### 2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# N04000003954

FILED Nov 28, 2005 Secretary of State

Entity Name: MISSION SQUARE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

11983 TAMIAMI TRAIL NORTH 1575 PINE RIDGE ROAD NAPLES, FL 34110

SUITE 16

NAPLES, FL 34109

**Current Mailing Address: New Mailing Address:** 

11983 TAMIAMI TRAIL NORTH 1575 PINE RIDGE ROAD NAPLES, FL 34110 SUITE 16

NAPLES, FL 34109

FEI Number: 20-1047824 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

VOGEL, JAMES DESQ VOGEL LAW OFFICE P.A 3936 TAMIAMI TRAIL NORTH, SUITE B NAPLES, FL 34103 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:

Name:

Date

# Electronic Signature of Registered Agent

( ) Delete

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

#### **OFFICERS AND DIRECTORS:**

(X) Change ( ) Addition

REILING, WILLIAM S SPANO, ANTHONY Name:

3936 TAMIAMI TRAIL NORTH SUITE B Address: 1575 PINE RIDGE ROAD, SUITE 5 Address:

City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 34109

Title: VTD () Delete Title: (X) Change ( ) Addition Name:

HOVLAND, STEVE Name: ACKERMAN, BRETT A Address: 11983 TAMIAMI TRAIL NORTH Address: 4288 SILVER FOX DR City-St-Zip: NAPLES, FL 34110 City-St-Zip: NAPLES, FL 34119

Title: () Delete Title: SEC (X) Change ( ) Addition VOGEL, JAMES D Name: FROST, JONATHAN M Name:

3936 TAMIAMI TRAIL NORTH SUITE B 1575 PINE RIDGE ROAD, SUITE 12 Address: Address:

City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 34109

Title: () Delete Title: TR ( ) Change (X) Addition

Name: Name: ZORN, GREGORY B

1575 PINE RIDGE ROAD, SUITE 16 Address: Address:

City-St-Zip: City-St-Zip: NAPLES, FL 34109

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: GREGORY B ZORN TR 11/28/2005