

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007935

FILED
Sep 10, 2009
Secretary of State

Entity Name: PRESERVE PLAZA COMMERCIAL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O MINETTE L LA CROIX
12050 SUMMERGATE CR, C-102
FT MYERS, FL 33913

New Principal Place of Business:

C/O COMMERCIAL PROP MGMT SRVCS
12424 BRANTLEY COMMONS COURT
FT MYERS, FL 33907

Current Mailing Address:

C/O CPMS
13131 UNIVERSITY DR.
FORT MYERS, FL 33907

New Mailing Address:

C/O COMMERCIAL PROP MGMT SRVCS
12424 BRANTLEY COMMONS COURT
FT MYERS, FL 33907

FEI Number: 37-1505024 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LA CROIX, MINETTE L
12050 SUMMERGATE CR, C-102
FT MYERS, FL 33913 US

Name and Address of New Registered Agent:

VAN VLECK, PAMELA K
12424 BRANTLEY COMMONS COURT
FT. MYERS, FL 33907 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: PAMELA K. VAN VLECK

09/10/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KINGON, KEN JR
Address: 24520 PRODUCTION CIR STE 7
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D () Delete
Name: KINGON, ANN
Address: 24520 PRODUCTION CIR STE 7
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D () Delete
Name: PARTRIDGE, BETTY
Address: 24520 PRODUCTION CIR STE 7
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D (X) Delete
Name: KNAPP, ERIC
Address: 18070 TAMiami TR
City-St-Zip: FORT MYERS, FL 33908

Title: D (X) Delete
Name: HANEY, VERN
Address: 18070 TAMiami TR
City-St-Zip: FORT MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PAMELA K. VAN VLECK

MGR

09/10/2009

Electronic Signature of Signing Officer or Director

Date