

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009255

FILED
Aug 23, 2007
Secretary of State

Entity Name: PLAZA DEL SOL PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2069 FIRST ST STE 301
FT MYERS, FL 33901

New Principal Place of Business:

2077 FIRST ST STE 203
FT MYERS, FL 33901

Current Mailing Address:

2069 FIRST ST STE 301
FT MYERS, FL 33901

New Mailing Address:

2077 FIRST ST STE 203
FT MYERS, FL 33901

FEI Number: 20-2265670 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:

COSTELLO, JAMES M
2069 FIRST ST STE 301
FT MYERS, FL 33901 US

Name and Address of New Registered Agent:

COSTELLO, JAMES M
2077 FIRST ST STE 203
FT MYERS, FL 33901 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: JAMES M. COSTELLO

08/23/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: WORTZEL, ALAN
Address: 2133 PERIWINKLE WAY
City-St-Zip: SANIBEL, FL 33957

Title: SD () Delete
Name: LANDL, AUGUST
Address: 500 SEA OATS DR
City-St-Zip: SANIBEL, FL 33957

Title: PD () Delete
Name: GIORDANI, ROSEANNE
Address: 2340 PERIWINKLE WAY UNIT M-1
City-St-Zip: SANIBEL, FL 33957

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:

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: ROSEANNE GIORDANI

PD

08/23/2007

Electronic Signature of Signing Officer or Director

Date