2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010028

FILED May 01, 2007 Secretary of State

Entity Name: CONDOMINIUM I AT BARLETTA ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 11691 GATEWAY BLVD. SUITE 203 FT. MYERS, FL 33913 **New Mailing Address: Current Mailing Address:** 11691 GATEWAY BLVD SUITE 203 FT. MYERS, FL 33913 FEI Number: 51-0527474 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: Name and Address of New Registered Agent: S & S GOLF MANAGEMENT, INC. 11691 GATEWAY BLVD. SUITE 203 FT. MYERS, FL 33913 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: () Change () Addition () Delete RIBLET, WILLIAM Name: Name: Address: 20050 BARLETTA LANE, #211 Address: City-St-Zip: ESTERO, FL 33928 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: LOCKHART, KENNETH Name: LOCKHART, KEN Address: 20071 BARLETTA LANE. #2711 Address: 20071 BARLETTA LANE, #2711 City-St-Zip: ESTERO, FL 33928 City-St-Zip: ESTERO, FL 33928 Title: STD () Delete Title: **VPD** (X) Change () Addition ANDREWS, FERRELL Name: FARNHAM, JAMES Name: 20070 BARLETTA LANE, #123 20071 BARLETTA LANE Address: Address: City-St-Zip: ESTERO, FL 33928 City-St-Zip: ESTERO, FL 33928

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: WILLIAM RIBLET PD 05/01/2007