2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2009
Secretary of State

DOCUMENT# N96000005926

Entity Name: THE STRAND COMMERCIAL ASSOCIATION, INC.

Current Principal Place of Business:

5672 STRAND BLVD
SUITE 1
NAPLES, FL 34110

New Principal Place of Business:

Current Mailing Address:

5672 STRAND BLVD
SUITE 1
NAPLES, FL 34110

New Mailing Address:

FEI Number: 59-3427432 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DORRILL, W NEIL
5672 STRAND CT STE ONE
NAPLES, FL 34110 US

Name and Address of New Registered Agent:

DORRILL, W NEIL
5672 STRAND CT
SUITE 1
NAPLES, FL 34110 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: _____ 01/08/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: GILHART, JOHN
Address: 5633 STRAND BLVD.
City-St-Zip: NAPLES, FL 34110

Title: T ( ) Delete
Name: TRASK, KEN
Address: 5633 STRAND BLVD
City-St-Zip: NAPLES, FL 34110

Title: S ( ) Delete
Name: SCHIRGIO, NICK
Address: 2167 PINEWOOD CIR
City-St-Zip: NAPLES, FL 34105

Title: ( ) Delete
Name:
Address:
City-St-Zip:

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: AS ( ) Change (X) Addition
Name: DORRILL, W NEIL
Address: 5672 STRAND CT STE 1
City-St-Zip: NAPLES, FL 34110

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: W NEIL DORRILL AS 01/08/2009
Electronic Signature of Signing Officer or Director — Date