

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT****FILED****Jan 18, 2007 08:00 AM
Secretary of State****DOCUMENT # 720762**1. Entity Name
THIRD STREET SOUTH AREA ASSOCIATION, INC.Principal Place of Business
1207 THIRD ST SOUTH
STE 5A
NAPLES, FL 34102 USMailing Address
1207 THIRD ST SOUTH
STE 5A
NAPLES, FL 34102 US

01122007 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE4. FEI Number
23-7153212Applied For
Not Applicable5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required**6. Name and Address of Current Registered Agent**ARAGON, JOSE
395 13TH AVE S
NAPLES, FL 34102**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**9. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to FeesUD00000592030
01/19/07-80046-008.61.25**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	S COLLINS, JUSTIN 255 13TH AVE. SO NAPLES, FL 34102
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RICHARDS, SUSAN 1207 THIRD STREET SOUTH NAPLES, FL 34102
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COPD RIDGWAY, TONY 1300 THIRD STREET SOUTH NAPLES, FL 34102
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COVD HARTINGTON, BURT 1167 THIRD STREET SOUTH NAPLES, FL 34102
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Susan Richards

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-12-7

Date

239-649-6707

Daytime Phone #