


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 19, 2007 8:00 am**  
**Secretary of State**

04-19-2007 90177 030 \*\*\*\*61.25

<b>DOCUMENT # 722717</b> 1. Entity Name <b>BIG PASS ASSOCIATION, INC.</b>					
Principal Place of Business 2477 STICKNEY PT RD S-118A SARASOTA, FL 34231 US			Mailing Address 2477 STICKNEY PT RD S-118A SARASOTA, FL 34231 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		04062007 Chg-NP CR2E037 (12/06)	
Zip		Country		4. FEI Number <b>59-1423107</b>	
				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
<b>ARGUS PROPERTY MANAGEMENT</b> 2477 STICKNEY PT RD 118A SARASOTA, FL 34231			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>		
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 <u><i>Kandy Shaw</i></u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>			DATE <u>4/9/07</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>		
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	DP	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	REDDING, KEITH		NAME		
STREET ADDRESS	4660 OCEAN BLVD #R2		STREET ADDRESS		
CITY-ST-ZIP	SARASOTA, FL 34242		CITY-ST-ZIP		
TITLE	DVT	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HOCK, LYNN		NAME		
STREET ADDRESS	4660 OCEAN BLVD #M1		STREET ADDRESS		
CITY-ST-ZIP	SARASOTA, FL 34242		CITY-ST-ZIP		
TITLE	DS	<input checked="" type="checkbox"/> Delete	TITLE <i>SEC</i>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	BRACKEN, ANNA		NAME	<i>JOHNSON, Barbara</i>	
STREET ADDRESS	4660 OCEAN BLVD #K2		STREET ADDRESS	<i>4660 ocean blvd #S1</i>	
CITY-ST-ZIP	SARASOTA, FL 34242		CITY-ST-ZIP	<i>Sarasota, FL 34242</i>	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE <i>T</i>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	MORRIS, ROGER		NAME	<i>DAVIS, Linda</i>	
STREET ADDRESS	4660 OCEAN BLVD #P2		STREET ADDRESS	<i>4660 ocean blvd #O-1</i>	
CITY-ST-ZIP	SARASOTA, FL 34242		CITY-ST-ZIP	<i>Sarasota, FL 34242</i>	
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	JUNGERHELA, WILLIAM		NAME	<i>PRES</i>	
STREET ADDRESS	#9 CENTER WOODS		STREET ADDRESS		
CITY-ST-ZIP	S. SAGINAW, MI 48603		CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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: <u><i>William Jungerhela</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <u>4/11/07</u> <small>Daytime Phone #</small>		