2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Feb 05, 2007 08:00 AM Secretary of State **DOCUMENT # 723362** 1. Entity Namo POLITICALLY ACTIVE PROPERTY OWNERS, INC Principal Place of Business Mailing Address 3001 ESTERO BLVD. 3001 ESTERO BLVD. FT. MYERS BEACH FL 33931 US FT. MYERS BEACH FL 33931 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suito, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) City & Stato City & State 4. FEI Number Applied For 59-1837587 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MYERS, THOMAS F. Street Address (P.O. Box Number is Not Acceptable) 3001 ESTERO BLVD. FT. MYERS BEACH FL 33931 Zip Code 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 FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be Trust Fund Contribution. Due By May 1, 2007 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete HITE NAME MYERS, THOMAS F NAME U00000623993 02/14/07-80013-009 61.25 STREET ADDRESS STREET ADDRESS 3001 ESTERO BLVD. CITY-ST-ZIP CITY-ST-76 FT. MYERS BEACH FL 33931 TITLE **VSTD** ☐ Delete TITLE Change Change Addition NAME: ALSOP, ANN NAME STREET ADDRESS STREET ADDRESS 2555 ESTERO BLVD. CITY-ST-7IP CITY-S1-ZIP FT. MYERS BEACH FL 33931 Delete HILE TITLE Change Addition NAME NAME HUGHES, DANIEL STREET ADDRESS STREET ADDRESS 270 RANDY LANE CITY-ST-7IP FT MYERS BEACH FL 33931 CITY-ST-7IP TITLE ☐ Defete IIILE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-SI-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP IIIE ☐ Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 eath, 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.

CITY-ST-7IP

CITY-ST-ZIP

SIGNATURE: Thomas F MyERS 01/31/07 239 463 7200