

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2007 8:00 am
Secretary of State

03-14-2007 90022 036 ****61.25

DOCUMENT # 725014

1. Entity Name
CONQUISTADOR CONDOMINIUM VII ASSOC. INC.



Principal Place of Business
**1800 S.E. ST. LUCIE BOULEVARD
STUART, FL 34996**

Mailing Address
**1800 S.E. ST. LUCIE BOULEVARD
STUART, FL 34996**

40035139



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02082007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
59-1545835

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FIDEI, CAMILLE
1800 SE ST LUCIE BLVD
STUART, FL 34996**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
DUBE, MARIE
1800 SE ST LUCIE BLVD 7-204
STUART, FL 34996** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
BROOKS, EVERETT
1800 SE ST LUCIE BLVD
STUART, FL 34996** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**1VP
KOVACS, PHYLLIS
1800 SE ST LUCIE BLVD
STUART, FL 34996** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
GAIRO, JOHN
1800 SE ST LUCIE BLVD
STUART, FL 34996** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
FRANCES, FABIANO
1800 SE ST LUCIE BLVD
STUART, FL 34996** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
STEGEMILLER, George
1800 SE ST LUCIE Blvd # 7-207
STUART, FL 34996** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
BROOKS, John
1800 SE ST LUCIE Blvd # 7-302
STUART, FL 34996** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
1st VPD ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**2nd VPD
BARCLAY, Robert
1800 SE ST LUCIE Blvd. # 7-106
STUART, FL 34996** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

Everett Brooks **EVERETT BROOKS** **3/14/2007** **772-288-0042**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #