

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725496

FILED
Apr 22, 2009
Secretary of State

Entity Name: THE NINE HUNDRED BUILDING INC

Current Principal Place of Business:

900 SIXTH AVENUE SOUTH
SUITE NO. 302
NAPLES, FL 341026792 US

New Principal Place of Business:

Current Mailing Address:

900 SIXTH AVENUE SOUTH
SUITE NO. 302
NAPLES, FL 341026792 US

New Mailing Address:

FEI Number: 59-1681630

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

INGRAM, L.N., III
900 SIXTH AVE SOUTH
STE 302
NAPLES, FL 341026792 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: INGRAM, L. N. III
Address: 900 6TH AVE SOUTH, STE 302
City-St-Zip: NAPLES, FL 341026792

Title: VD () Delete
Name: SCHWEIKHARDT, KATHERINE
Address: 900 6TH AVE SOUTH, STE 203
City-St-Zip: NAPLES, FL 341026745

Title: STD () Delete
Name: WHITLEY, S. WARD
Address: 900 SIXTH AVENUE SOUTH, STE 304
City-St-Zip: NAPLES, FL 341026745 US

Title: D () Delete
Name: YEAGER, JOHN J
Address: 900 6TH AVE SOUTH, STE 102
City-St-Zip: NAPLES, FL 341026745 US

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: () Change () Addition
Name:
Address:
City-St-Zip:

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: /S/ L. N. INGRAM, III

PRES

04/22/2009

Electronic Signature of Signing Officer or Director

Date