

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729073

FILED  
Apr 29, 2007  
Secretary of State

**Entity Name:** BEN MAR CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2590 FIRST ST  
FT. MYERS, FL 33901 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 08065  
FORT MYERS, FL 33908

**New Mailing Address:**

**FEI Number:** 59-1531445

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DEBOEST, RICHARD D.  
1415 HENDRY ST.  
FT. MYERS, FL 33901 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: VD ( ) Delete  
Name: CLARK, BILL  
Address: 2590 FIRST STREET # 208  
City-St-Zip: FT MYERS, FL 33901

Title: TD ( ) Delete  
Name: MC NABB, DORTHY  
Address: 2590 FIRST STREET #106  
City-St-Zip: FT MYERS, FL

Title: PD ( ) Delete  
Name: WAYLAND, TERRY  
Address: 7680 CAMBRIDGE MANOR PLACE SUITE 102  
City-St-Zip: FT MYERS, FL 33907

Title: SD ( ) Delete  
Name: ANDY, MCCREEDY  
Address: 14561 PALM BEACH BLVD. SUITE 30  
City-St-Zip: FT MYERS, FL 33905

Title: DR ( ) Delete  
Name: CATALANO, DONALD  
Address: 22 ADIRONDACK STREET  
City-St-Zip: SOUTH BURLINGTON, VT 05403

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: DR (X) Change ( ) Addition  
Name: ALVERAZ, LAURA  
Address: 2590 FIRST STREET #112  
City-St-Zip: FT MYERS, FL 33901

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: JEAN G. SPRAGUE

CAM

04/29/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date