

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730071

FILED
Apr 30, 2007
Secretary of State

Entity Name: CLAM COURT CONDOMINIUM, INC.

Current Principal Place of Business:

1195 CLAM CT
#202
NAPLES, FL 34102 US

New Principal Place of Business:

Current Mailing Address:

1195 CLAM CT
#202
NAPLES, FL 34102 US

New Mailing Address:

FEI Number: 59-1655374

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATERMAN, JOELLEN
1155 CLAM CT
#202
NAPLES, FL 34102 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: WATERMAN, JOELLEN
Address: 1195 CLAM COURT #202
City-St-Zip: NAPLES, FL 34102

Title: VD () Delete
Name: PUSICH, TOM
Address: 1195 CLAM COURT #203
City-St-Zip: NAPLES, FL 34102

Title: TD () Delete
Name: SAWTELK, GLENN
Address: 1195 CLAM COURT #103
City-St-Zip: NAPLES, FL 34102

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:

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: GLENN SAWTELLE

SECR

04/30/2007

Electronic Signature of Signing Officer or Director

Date