

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

**FILED**

**Feb 05, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # 733502**

1. Entity Name

CHARLEVOI CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

Mailing Address

150 W RETTA ESPLANADE  
#101  
PUNTA GORDA FL 33950-3603  
US

150 W RETTA ESPLANADE  
#101  
PUNTA GORDA FL 33950-3603  
US



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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

59-1524507

Applied For

Not Applicable

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

BECKER & POLIAKOFF, P.A.  
3111 STIRLING RD.  
FORT LAUDERDALE FL 33310

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

**FILE NOW: 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: D ☐ Delete  
NAME: GREEN, JOAN  
STREET ADDRESS: 150 W. RETTA ESPLANADE #122  
CITY-ST-ZIP: PUNTA GORDA FL 33950

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

TITLE: D ☐ Delete  
NAME: STEVENSON, EARL  
STREET ADDRESS: 150 W RETTA ESPLANADE, #306  
CITY-ST-ZIP: PUNTA GORDA FL 33950

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

TITLE: TD ☐ Delete  
NAME: HOLLANDER, JULIE  
STREET ADDRESS: 150 W. RETTA ESPLANADE #230  
CITY-ST-ZIP: PUNTA GORDA FL 33950-3644

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

TITLE: VCD ☐ Delete  
NAME: BURKE, JOHN  
STREET ADDRESS: 1605 VIA DOLCE VITA  
CITY-ST-ZIP: PUNTA GORDA FL 33950

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

TITLE: CD ☐ Delete  
NAME: MYERS, WALTER  
STREET ADDRESS: 150 W. RETTA ESPLANADE #326  
CITY-ST-ZIP: PUNTA GORDA FL 33950

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

TITLE: SD ☐ Delete  
NAME: NOCITO, JOHN  
STREET ADDRESS: 150 W RETTA ESPLANADE #228  
CITY-ST-ZIP: PUNTA GORDA FL 33950

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

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 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:

*Julie Hollander* Julie Hollander 2/1/07 941-639-4492