## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 744379**

FILED Apr 27, 2006 Secretary of State

Entity Name: ACCESS COMMONS "D" ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

P O BOX 11209

NAPLES, FL 34101 US

Current Mailing Address: New Mailing Address:

P O BOX 11209

NAPLES, FL 34101 US

FEI Number: 65-0305250 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

HART, STEPHEN P COLLIER FINANCIAL, INC 4985 E TAMIAMI TRAIL NAPLES, FL 34113 US

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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD ( ) Delete

 Name:
 HARRIS, SCOTT

 Address:
 P.O. BOX 11209

Address: P.O. BOX 11209 City-St-Zip: NAPLES, FL 34101

Title: VPD ( ) Delete

Name: EVANS, JACK

Address: 4651 GULF SHORE BLVD. N

City-St-Zip: NAPLES, FL 34103

Title: TD () Delete
Name: COFFEEN, BOB

Address: 4601 GULFSHORE BLVD N

City-St-Zip: NAPLES, FL 34103

Title: SD () Delete
Name: BEEMSTERBOER, MARIE
Address: 4551 GULF SHORE BLVD. N

City-St-Zip: NAPLES, FL 34103

itle: SD (X) Change ( ) Addition

 Name:
 HARRIS, SCOTT

 Address:
 P.O. BOX 11209

 City-St-Zip:
 NAPLES, FL 34101

Title: PD (X) Change ( ) Addition

Name: EVANS, JACK

Address: 4651 GULF SHORE BLVD. N

City-St-Zip: NAPLES, FL 34103

Title: VD (X) Change ( ) Addition

Name: COFFEEN, BOB

Address: 4601 GULFSHORE BLVD N

City-St-Zip: NAPLES, FL 34103

Title: TD (X) Change ( ) Addition
Name: BEEMSTERBOER, MARIE
Address: 4551 GULF SHORE BLVD. N

City-St-Zip: NAPLES, FL 34103

I hereby certify that the information supplied with this filing does not qualify for the 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: JACK EVANS PD 04/27/2006