

**FILED**  
**Apr 01, 2005 8:00 am**  
**Secretary of State**

<b>DOCUMENT # 747941</b>			
<b>1. Entity Name</b> CLAM COURT MARINA APARTMENT ASSOCIATION, INC.			
<b>Principal Place of Business</b> 1165 CLAM COURT #3 NAPLES, FL 33962		<b>Mailing Address</b> 802 ANCHOR RODE DRIVE NAPLES, FL 33940-2739 US	
<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc. <b>D 304</b>	
City & State		City & State <b>NAPLES FL</b>	
Zip	Country	Zip <b>34102</b>	Country <b>USA</b>
<b>6. Name and Address of Current Registered Agent</b>			
<b>BLUEMEL, MALCOLM</b> 802 ANCHOR RODE DRIVE C/O ACCOUNTING & TAX ASSOC. OF NAPLES NAPLES, FL 34103			Name <b>Fos</b> Street Address <b>FOS</b> <b>501</b> City <b>NAP</b>
<b>8. The above named entity submits this statement for the purpose of changing its registered office or registered agent.</b>			
<b>SIGNATURE</b> <u>CATHERINE M FOSTH, CPA.</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>			<small>(NOTE: Registered Agent signature required)</small>
<b>Filing Fee Is \$61.25</b> <b>Due by May 1, 2005</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/>	
<b>10. OFFICERS AND DIRECTORS</b>			
TITLE	D	<input type="checkbox"/> Delete	
NAME	KIRK HUFF, JOAN		
STREET ADDRESS	1025 WOODWARD DRIVE		
CITY-ST-ZIP	MADISON, WI 537042241		
TITLE	DS	<input checked="" type="checkbox"/> Delete	
NAME	MYHRA, JULIE		
STREET ADDRESS	1165 CLAM COURT, #3		
CITY-ST-ZIP	NAPLES, FL		
TITLE	TD SECRETARY & TREASURER	<input type="checkbox"/> Delete	
NAME	FITZGIBBON, JOHN		
STREET ADDRESS	7709 W PARKSIDE DR		
CITY-ST-ZIP	BOARDMAN, OH 44512		
TITLE	DP	<input checked="" type="checkbox"/> Delete	
NAME	JONES, ROBERT		
STREET ADDRESS	59 ALDEN ROAD		
CITY-ST-ZIP	WEST YARMOUTH, MA 02673		
TITLE	VP PRESIDENT	<input type="checkbox"/> Delete	
NAME	EARLY, MARIE		
STREET ADDRESS	1165 CEAM CT., #10		
CITY-ST-ZIP	NAPLES, FL 34102		
TITLE	VICE PRESIDENT	<input type="checkbox"/> Delete	
NAME	MARK FEGLEY		
STREET ADDRESS	336 LAMBTON LANE		
CITY-ST-ZIP	NAPLES FL 34104		
<b>12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 609.01(1)(a) of the Florida Statutes, Chapter 609, Part II, which relates to the filing of annual reports of corporations, because:</b>			
The corporation or the receiver or trustee empowered to execute this report as required by Chapter 609, Part II, has changed, or on an attachment with an address, with all other like empowered.			
<b>SIGNATURE:</b> <u>John Fitzgerald</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			