

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747941

FILED  
May 01, 2008  
Secretary of State

**Entity Name:** CLAM COURT MARINA APARTMENT ASSOCIATION, INC.

**Current Principal Place of Business:**

1165 CLAM COURT #2  
APT #2  
NAPLES, FL 34102

**New Principal Place of Business:**

**Current Mailing Address:**

1165 CLAM COURT #2  
APT #2  
NAPLES, FL 34102 US

**New Mailing Address:**

**FEI Number:** 59-1982190 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

FITZGIBBON, JOHN  
1165 CLAM COURT APT 2  
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: D ( ) Delete  
Name: KIRK HUFF, CURTIS  
Address: 1025 WOODWARD DRIVE  
City-St-Zip: MADISON, WI 537042241

Title: ST ( ) Delete  
Name: FITZGIBBON, JOHN  
Address: 7709 W PARKSIDE DR  
City-St-Zip: BOARDMAN, OH 44512

Title: P ( ) Delete  
Name: EARLY, MARIE  
Address: 1165 CLAM CT., #10  
City-St-Zip: NAPLES, FL 34102

Title: VP ( ) Delete  
Name: FEGLEY, MARK  
Address: 336 LAMPTON LANE  
City-St-Zip: NAPLES, FL 34104

Title: D ( ) Delete  
Name: JONES, SHIRLEY  
Address: 59 ALDON RD.  
City-St-Zip: WEST YARMOUTH, MA 02673

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

Title: VP (X) Change ( ) Addition  
Name: KIRK HUFF, CURTIS  
Address: 1025 WOODWARD DRIVE  
City-St-Zip: MADISON, WI 537042241

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

Title: D (X) Change ( ) Addition  
Name: OCONNELL, MAUREEN  
Address: 1165 CLAM COURT #6  
City-St-Zip: NAPLES, FL 34102

Title: P (X) Change ( ) Addition  
Name: FEGLEY, MARK  
Address: 336 LAMPTON LANE  
City-St-Zip: NAPLES, FL 34104

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: JOHN FITZGIBBON

ST

05/01/2008

Electronic Signature of Signing Officer or Director

Date