

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

**FILED
May 02, 2006 8:00 am
Secretary of State**

05-02-2006 90165 047 ****61.25

DOCUMENT # 750464

1. Entity Name
STEAMBOAT BEND CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**9411 CYPRESS LAKE DRIVE
SUITE 2
FORT MYERS, FL 33919 US**

Mailing Address
**9411 CYPRESS LAKE DRIVE
SUITE 2
FORT MYERS, FL 33919 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Zip

Country

03282006 Chg-NP CR2E037 (11/05)

4. FEI Number
59-1962997

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

**CRUZ, BRYAN
C/O SCHOO MANAGEMENT, INC
9411 CYPRESS LAKE DRIVE, SUITE 2
FORT MYERS, FL 33919**

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

**Filing Fee is \$61.25
Due by May 1, 2006**

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 SCHMOYER, PAUL
STREET ADDRESS 4200 STEAMBOAT BEND, #103
CITY-ST-ZIP FT MYERS, FL 33919

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE VD Delete
NAME FORBES, WARREN
STREET ADDRESS 4200 STEAMBOAT BEND, # 405
CITY-ST-ZIP FORT MYERS, FL 33919

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE PD Delete
NAME LEHMANN, JOHN
STREET ADDRESS 4240 STEAM BOAT BEND #201
CITY-ST-ZIP FORT MYERS, FL 33919

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE D Delete
NAME DOLAN, BETH
STREET ADDRESS 4200 STEAMBOAT BEND, # 305
CITY-ST-ZIP FORT MEYERS, FL 33919

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE TD Delete
NAME BURG, WILLIAM
STREET ADDRESS 4200 STEAMBOAT BEND #401
CITY-ST-ZIP FORT MYERS, FL 33919

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE SD Delete
NAME YOUNG, ANN
STREET ADDRESS 480 LONG AVE
CITY-ST-ZIP MANASQUAN, NJ 08736

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D Change Addition
Dick Ryan
4210 Steamboat Bend #402
Fort Myers, FL 33919

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: William BURG William Burg Secy 4/5/06 239-481-4702

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #