
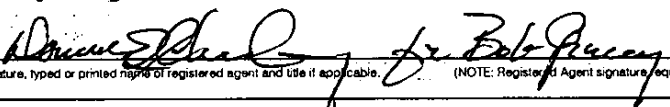
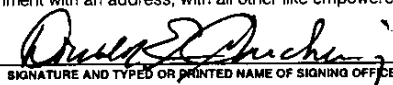


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 08, 2008 8:00 am**  
**Secretary of State**

05-08-2008 90014 037 \*\*\*\*61.25

<b>DOCUMENT # 754104</b> 1. Entity Name <b>BLOCK E COMMONS ASSOCIATION, INC.</b>					
Principal Place of Business <b>C/O SOUTHWEST PROPERTY MNGMT. 1044 CASTELLO DR., #206 NAPLES, FL 34103 US</b>			Mailing Address <b>C/O SOUTHWEST PROPERTY MNGMT. 1044 CASTELLO DR., #206 NAPLES, FL 34103 US</b>		
2. Principal Place of Business - No P.O. Box # <b>MANAGEMENT BY ASSN, INC</b> Suite, Apt. #, etc.		3. Mailing Address <b>187 FOREST LAKES BLVD.</b> Suite, Apt. #, etc.			
City & State <b>NAPLES, FL</b> Zip <b>34105</b>		City & State  Zip  Country		4. FEI Number <b>59-2252545</b> Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>		04152008 Chg-NP CR2E037 (12/06)			
6. Name and Address of Current Registered Agent  <b>SOUTHWEST PROPERTY MNGMT. COPRP. 1044 CASTELLO DR., #206 NAPLES, FL 34103</b>			7. Name and Address of New Registered Agent Name <b>GRACEY ROBERT T.</b> Street Address (P.O. Box Number is Not Acceptable) <b>187 FOREST LAKES BLVD.</b> City <b>NAPLES</b> <b>FL</b> Zip Code <b>34105</b>		
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  <b>4-21/08</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE					
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		<b>Make check payable to: Florida Department of State</b>	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TODD, MILDRED 1865 COURTYARD WAY, #106F NAPLES, FL 34112	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SCIOLI, SAM 1915 SOURTYARD WAY, #G101 NAPLES, FL 34112	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CHICKERING, DON 1733 COURTYARD WAY, B-106 NAPLES, FL 34112	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CHANDLER, MARK 1833 COURTYARD WAY #E201 NAPLES, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SWENSON, ROLAND 1701 COURTYARD WAY, #201D NAPLES, FL 34112	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DORAU, BILL 1901 COURTYARD WAY #C204 NAPLES, FL 34112	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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.					
<b>SIGNATURE:</b> 			<b>4/21/08</b> Date Daytime Phone #		