

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754486

FILED
Apr 12, 2007
Secretary of State

Entity Name: MOORINGS POINT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O AMERICAN CONDO MGMT
103
CAPE CORAL, FL 33914

New Principal Place of Business:

4510 NORTH KEY DRIVE
NORTH FORT MYERS, FL 33903

Current Mailing Address:

C/O AMERICAN CONDO MGMT
103
CAPE CORAL, FL 33914

New Mailing Address:

C/O SILVERCRESTED MGT., INC.
P. O. BOX 1848
FORT MYERS, FL 33902

FEI Number: 59-2264051

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KASE, SUE
AMERICAN RENTAL MANAGEMENT
615 CAPE CORAL PKWY 1-#103
CAPE CORAL, FL 33914 US

Name and Address of New Registered Agent:

SILVERCRESTED MGT., INC.
3440 MARINATOWN LANE
203
NORTH FORT MYERS, FL 33903 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: LEE J. VAN TILBURG

04/12/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: GIRTEN, ROY
Address: 4510 N KEY DR. #604
City-St-Zip: N.FT.MYERS, FL

Title: D () Delete
Name: MIDDLETON, DAVID
Address: 4510 N KEY DR., #304
City-St-Zip: N.FT.MYERS, FL

Title: SD () Delete
Name: WILSON, SYLVIA
Address: 4510 NORTH KEY DRIVE #204
City-St-Zip: N FT MYERS, FL 33903

Title: PD () Delete
Name: HARDY, KEN
Address: 4510 N KEY DRIVE 406
City-St-Zip: N FT MYERS, FL

Title: TD () Delete
Name: WALLACE, ROSEMARY
Address: 4510 NORTH KEY DRIVE #106
City-St-Zip: NORTH FORT MYERS, FL 33903

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: KEN HARDY

P

04/12/2007

Electronic Signature of Signing Officer or Director

Date