

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754787

FILED
Jul 13, 2007
Secretary of State

Entity Name: EXCHANGE CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3848 EXCHANGE AVE.
NAPLES, FL 34104 US

New Principal Place of Business:

Current Mailing Address:

3848 EXCHANGE AVE.
NAPLES, FL 34104 US

New Mailing Address:

FEI Number: 59-2070485 **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:

TAMI, FLEMING S TREASUR
3040 OILWELL RD.
NAPLES, FL 34120 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: P () Delete
Name: RODGER, LARRY PRESIDE
Address: 3824 EXCHANGE AVE
City-St-Zip: NAPLES, FL 34104

Title: SD () Delete
Name: LANGLEY, SANDRA SECRETA
Address: 3137 CARRIAGE LN
City-St-Zip: NAPLES, FL 34105

Title: T () Delete
Name: FLEMING, TAMI TREASUR
Address: 3040 OILWELL RD.
City-St-Zip: NAPLES, FL 34120

Title: VP () Delete
Name: BENTLY, CHARLES A VICE PR
Address: 3842 EXCHANGE AVE
City-St-Zip: NAPLES, FL 34104

Title: D () Delete
Name: WADISVEWSKI, ED
Address: 3814 EXCHANGE AVE
City-St-Zip: NAPLES, FL 34104

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: VP (X) Change () Addition
Name: FLEMING, LANCE J VICE PR
Address: 3842 EXCHANGE AVE
City-St-Zip: NAPLES, FL 34120

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: TAMI FLEMING

TREA

07/13/2007

Electronic Signature of Signing Officer or Director

Date