

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2008 8:00 am
Secretary of State

01-24-2008 90029 047 ****61.25

DOCUMENT #755759 1. Entity Name SECURITY BARN CONDOMINIUM WAREHOUSES ASSOCIATION, INC.					
Principal Place of Business 1133 INDUSTRIAL BLVD C-14 NAPLES, FL 34104			Mailing Address 1133 INDUSTRIAL BLVD C-14 NAPLES, FL 34104		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-2100051	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SMITH, PEGGY 659 MOORINGLINE DR NAPLES, FL 34102				7. Name and Address of New Registered Agent 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 <u><i>Peggy R Smith, Secy. Treas.</i></u> 3-3-08 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, 2008		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 NAME STREET ADDRESS CITY-ST-ZIP	PD KOOP, RICHARD 4118 PROGRESS AVE NAPLES, FL 34104	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Maurice Gutierrez</i> 2736 Shoreline Dr Naples, FL 34112	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD SMITH, PEGGY 659 MOORINGLINE DR NAPLES, FL 34102	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Dave Mann</i> 5311 Mahogany Ridge Dr SW Naples, FL 34101	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP NARR, DAVE 5311 MAHOGANY RIDGE DR SW NAPLES, FL 34101	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Richard Koop</i> 4116 Progress Ave Naples, FL 34104	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SMITH, PEGGY 659 MOORINGLINE DR NAPLES, FL 34102	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Mark Niff</i> 290 Seville Blvd Naples, FL 34104	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	_____ _____ _____ _____	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	_____ _____ _____ _____	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	_____ _____ _____ _____	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	_____ _____ _____ _____	☐ Change ☐ 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.					
SIGNATURE: <u><i>Peggy R Smith Secy. Treas.</i></u> 3/3/08 236-43-3455 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone					

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