

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2007 8:00 am
Secretary of State

05-04-2007 90092 014 ****61.25

DOCUMENT # 756181 1. Entity Name EGRET CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 211 SE 15TH PLACE CAPE CORAL, FL 33990 US			Mailing Address 211 SE 15TH PL. CAPE CORAL, FL 33990 US		
2. Principal Place of Business - No P.O. Box # % American Condo Mgmt Suite, Apt. #, etc. # 615 Cape Coral Pkwy W. - 103 City & State CAPE CORAL, FL Zip 33914		3. Mailing Address % American Condo Mgmt Suite, Apt. #, etc. # POB 100399 City & State CAPE CORAL, FL Zip 33910			
4. FEI Number 59-2170541				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Chg-NP CR2E037 (12/06)	
6. Name and Address of Current Registered Agent OSBORNE, RICHARD M PRES. 211 SE 15TH PLACE CAPE CORAL, FL 33990			7. Name and Address of New Registered Agent Name <u>SUSAN KASE, CAM</u> Street Address (P.O. Box Number is Not Acceptable) % American Condo Mgmt 615 Cape Coral Parkway W. # 103 City <u>CAPE CORAL</u> FL Zip Code <u>33914</u>		
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>Susan Kase</u> <small>Signature typed or printed name of registered agent and title if applicable.</small>		<u>Susan Kase</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>		<u>4/30/07</u> <small>DATE</small>	
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST SAULS, CHERYLE 215 SE 15TH PLACE #209 CAPE CORAL, FL 33990	<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	P OSBORNE, RICHARD M 209 SE 15TH PLACE #110 CAPE CORAL, FL 33990	<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 NOWINSKI, LOIS 223 SE 15TH PLACE #204 CAPE CORAL, FL 33990	<input checked="" 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 PRATT, IRENE 215 SE 15TH PLACE #208 CAPE CORAL, FL 33990	<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 NAGORO, CAROL 215 SE 15TH PLACE #109 CAPE CORAL, FL 33990	<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 BLACKBURN, JOE 209 SE 15TH PLACE #111 CAPE CORAL, FL 33990	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	YP BLACKBURN, JOE <input checked="" 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.					
SIGNATURE: <u>Richard Osborne</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<u>Richard Osborne Pres</u> <small>Date</small>		<u>239-542-4404</u> <small>Daytime Phone #</small>	