

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758285

FILED
Mar 31, 2010
Secretary of State

Entity Name: MCGREGOR VILLAGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O CAPITAL PROPERTIES GROUP, LLC
3364 CLEVELAND AVE
FORT MYERS, FL 33901 US

New Principal Place of Business:

Current Mailing Address:

C/O CAPITAL PROPERTIES GROUP, LLC
3364 CLEVELAND AVE
FORT MYERS, FL 33901 US

New Mailing Address:

FEI Number: 59-2296854

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAGER, KENNETH D
C/O CAPITAL PROPERTIES GROUP, LLC
3364 CLEVELAND AVE
FORT MYERS, FL 33901 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: S
Name: BARRY, MARGUERITE
Address: 13663 MCGREGOR VILLAGE DR #17D
City-St-Zip: FORT MYERS, FL 33919 US

Title: P
Name: OQUENDO, SUZANNE
Address: 13647 MCGREGOR VILLAGE DR
City-St-Zip: FORT MYERS, FL 33919 US

Title: VP
Name: CARKIN, ROBERT
Address: 13647 MCGREGOR VILLAGE DR
City-St-Zip: FORT MYERS, FL 33919 US

Title: D
Name: BOWMAN, ROBERT
Address: 13647 MCGREGOR VILLAGE DR
City-St-Zip: FORT MYERS, FL 33919

Title: T
Name: COLLINS, THOMAS
Address: 13647 MCGREGOR VILLAGE DR
City-St-Zip: FORT MYERS, FL 33919

I hereby 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 all other like empowered.

SIGNATURE: SUZANNE OQUENDO

PRES

03/31/2010

Electronic Signature of Signing Officer or Director

Date