

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764119

FILED
Apr 27, 2007
Secretary of State

Entity Name: KASOTA BAY ASSOCIATION, INC.

Current Principal Place of Business:

921 8TH AVENUE S.
NAPLES, FL 33940

New Principal Place of Business:

Current Mailing Address:

792 94 AVE. N.
NAPLES, FL 34108

New Mailing Address:

745 12TH AVE S.
AA
NAPLES, FL 34102

FEI Number: 59-2380079

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PUTNAM, DAVID
792 94 AVE. N.
NAPLES, FL 34108 US

Name and Address of New Registered Agent:

MOORE PROPERTY MANAGEMENT
745 12TH AVE. S. #AA
NAPLES, FL 34102 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: GRAHAM NORCOMBE

04/27/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: DAMIANOS, SYLVESTER
Address: 921 8TH AVE. S.
City-St-Zip: NAPLES, FL

Title: DT () Delete
Name: KELLY, PAT
Address: 917 8TH AVE. S.
City-St-Zip: NAPLES, FL

Title: D () Delete
Name: EDDY, MICHELLE
Address: 205 TOPANGA DR.
City-St-Zip: NAPLES, FL 34134

Title: T () Delete
Name: MURPHY, TOM
Address: 616 BERKSHIRE DR
City-St-Zip: PITTSBURGH, PA 15215

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:

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: SYLVESTER DAMIANOS

P

04/27/2007

Electronic Signature of Signing Officer or Director

Date