2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT#768893

FILED May 30, 2006 Secretary of State

Entity Name: AIRPORT WOODS COMMERCE CENTER PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O GEIS CONSTRUCTION C/O SAMINCO

10020 AURORA-HUDSON RD. 10030 AMBERWOOD ROAD STREETSBORO, OH 44241 US FORT MYERS, FL 33913

New Mailing Address: **Current Mailing Address:**

C/O GEIS CONSTRUCTION C/O SAMINCO

10020 AURORA- HUDSON RD 10030 AMBERWOOD ROAD STREETSBORO, OH 44241 FORT MYERS, FL 33913

FEI Number: 65-0133226 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GEIS, KATHERINE C/O KINGS PORT CLUB

10030 AMBERWOOD ROAD 2150 GULFSHORE BOULEVARD, #207 FORT MYERS, FL 33913 NAPLES, FL 33740 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.

POSMA, BONNE PRES

SIGNATURE: BONNE POSMA 05/30/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

GEIS, KATHERINE TRUS, TEE OF ERWIN G E IS TRU POSMA, BONNE Name: Name:

10020 AURORA-HUDSON RD. Address: 10030 AMBERWOOD ROAD Address:

City-St-Zip: STREETSBORO, OH City-St-Zip: FORT MYERS, FL 33913

Title: SD () Delete Title: (X) Change () Addition

WEST, MR. WILLIAM N., Name: PACKARD, MARTIN S Name: Address: % 1100 SUPERIOR AVENUE Address: 4140 W. GULF DRIVE City-St-Zip: CLEVELAND, OH City-St-Zip: SANIBEL, FL 33957 US

Title: () Delete Title: SEC (X) Change () Addition

GEIS, KATHERINE, OAKS, KENNETH H Name: Name:

10020 AURORA-HUDSON RD. 12244 TREELINE AVENUE, SUITE #4 Address: Address: City-St-Zip: STREETSBORO, OH City-St-Zip: FORT MYERS, FL 33913

Title: () Delete Title: **TRES** () Change (X) Addition Name: Name: PANICARO, NICK

% OLD FLORIDA BANK, 6321 DANIEL PKWY Address: Address:

City-St-Zip: City-St-Zip: FORT MYERS, FL 33912 US

I hereby certify that the information supplied with this filing does not qualify for the 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: BONNE POSMA **PRES** 05/30/2006