


2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

FILED
Apr 26, 2004 08:00 AM
Secretary of State

DOCUMENT # N00000002696 1. Entity Name THE TRADE CENTER CONDOMINIUM ASSOCIATION, INC.	
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Principal Place of Business 5651 HALIFAX AVE #5 FORT MYERS, FL 33912 US	Mailing Address P.O. BOX 610 FT. MYERS, FL 33902
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04122004 No Chg-NP CR2E037 (10/03)

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4. FEI Number 59-3650481	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent WINESETT, RICHARD W 2248 1ST ST. FT. MYERS, FL 33901
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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 _____ (NOTE: Registered Agent signature required when reinstating) **DATE** _____

Filing Fee is \$61.25 Due by May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000132923 04/27/04-80064-017 61.25
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10. OFFICERS AND DIRECTORS	
TITLE	PSD
NAME	ROGERO, RICHARD A
STREET ADDRESS	15080 WHIMBREL CT
CITY-ST-ZIP	FORT MYERS, FL 33908
TITLE	VD
NAME	GRANT, WILLIAM C
STREET ADDRESS	18400 TELEGRAPH CREEK LN
CITY-ST-ZIP	ALVA, FL 33920
TITLE	TD
NAME	ROGERO, GLYNNIS M
STREET ADDRESS	15080 WHIMBREL CT
CITY-ST-ZIP	FORT MYERS, FL 33908
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Glynnis M. Rogero **Glynnis M. Rogero, Treas.** 4/23/04 239-561-3333
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #