2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2007
Secretary of State

DOCUMENT# N00000005580

Entity Name: TAYLOR VILLAGE OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

5405 TAYLOR RD
#16
NAPLES, FL 34109

New Principal Place of Business:

5401 TAYLOR RD
#6
NAPLES, FL 34109

Current Mailing Address:

5405 TAYLOR RD
16
NAPLES, FL 34109

New Mailing Address:

5401 TAYLOR RD
#6
NAPLES, FL 34109

FEI Number: 65-1035428 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MUNN, ROBERT
5405 TAYLOR RD
STE 16
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

KOEHLER, ROBERT
5405 TAYLOR RD
STE 17
NAPLES, FL 34109 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: ROBERT KOEHLER 03/22/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete
Name: KOEHLER, ROBERT
Address: 5405 TAYLOR RD #16
City-St-Zip: NAPLES, FL 34109

Title: V P ( ) Delete
Name: EDWARDS, GUS
Address: 5405 TAYLOR RD #9
City-St-Zip: NAPLES, FL 34109

Title: SEC ( ) Delete
Name: ROSALES, ORLANDO
Address: 5405 TAYLOR RD #10 & 11
City-St-Zip: NAPLES, FL 34109

Title: TRES ( ) Delete
Name: MUNN, ROBERT
Address: 5405 TAYLOR ROAD # 16
City-St-Zip: NAPELS, FL 34109

Title: D ( ) Delete
Name: GUITARD, JOHN
Address: 5401 TAYLOR ROAD # 2
City-St-Zip: NAPLES, FL 34109

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: KOEHLER, ROBERT
Address: 5405 TAYLOR RD #17
City-St-Zip: NAPLES, FL 34109

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: TRES (X) Change ( ) Addition
Name: TRACY, WILLIAM B
Address: 5405 TAYLOR ROAD # 15
City-St-Zip: NAPELS, FL 34109

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: WILLIAM B TRACY TRES 03/22/2007
Electronic Signature of Signing Officer or Director Date