

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006201

FILED  
Aug 04, 2006  
Secretary of State

**Entity Name:** VETERANS PARK COMMONS OFFICE BUILDING I CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

5455 JAEGER RD  
NAPLES, FL 34109

**New Principal Place of Business:**

1865 VETERANS PARK DRIVE  
NAPLES, FL 34109

**Current Mailing Address:**

C/O COLONIAL SQUARE REALTY  
P.O. BOX 10608  
NAPLES, FL 34101

**New Mailing Address:**

1865 VETERANS PARK DRIVE  
BOX #3  
NAPLES, FL 34109

**FEI Number:** 90-0069729      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

SOLDAVINI, BRIGID  
5455 JAEGER RD  
NAPLES, FL 34109      US

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

MIKES, JASON  
1395 PANTHER LANE  
SUITE 300  
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: JASON MIKES

08/04/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: HOEFT, JACK  
Address: 1865 VETERANS PARK AVE  
City-St-Zip: NAPLES, FL 34109

Title: VPD      ( ) Delete  
Name: MONTECALVO, RAYMOND  
Address: 1865 VETERANS PARK AVE  
City-St-Zip: NAPLES, FL 34109

Title: STD      ( ) Delete  
Name: SOLDAVINI, BRIGID  
Address: 5455 JAEGER RD  
City-St-Zip: NAPLES, FL 34109

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD      (X) Change ( ) Addition  
Name: CUCCINELLO, ROBERT  
Address: 1865 VETERANS PARK DRIVE  
City-St-Zip: NAPLES, FL 34109

Title: STD      (X) Change ( ) Addition  
Name: MONTECALVO, RAYMOND  
Address: 1865 VETERANS PARK DRIVE  
City-St-Zip: NAPLES, FL 34109

Title: VD      (X) Change ( ) Addition  
Name: DINSEY, DALAS  
Address: 1865 VETERANS PARK DRIVE  
City-St-Zip: NAPLES, FL 34109

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: ROBERT CUCCINELLO

PD

08/04/2006

Electronic Signature of Signing Officer or Director

Date