

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001817

FILED  
Feb 26, 2011  
Secretary of State

**Entity Name:** ST. JAMES PLACE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

175 KINGS HIGHWAY  
BUILDING 9  
PORT CHARLOTTE, FL 33983 US

**New Principal Place of Business:**

**Current Mailing Address:**

175 KINGS HIGHWAY  
BUILDING 9, UNIT 928  
PORT CHARLOTTE, FL 33983 US

**New Mailing Address:**

**FEI Number:** 65-1103691      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

THOMPSON, FRANK D  
175 KINGS HIGHWAY, UNIT 928  
BUILDING 9  
PORT CHARLOTTE, FL 33983 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: THOMPSON, FRANK  
Address: 175 KINGS HIGHWAY UNIT 928  
City-St-Zip: PORT CHARLOTTE, FL 33983 US

Title: SD  
Name: FISHER, FRED  
Address: 175 KINGS HIGHWAY UNIT 912  
City-St-Zip: PORT CHARLOTTE, FL 33983 US

Title: TD  
Name: ALLEN, KATHERINE  
Address: 175 KINGS HIGHWAY UNIT 938  
City-St-Zip: PORT CHARLOTTE, FL 33983 US

I hereby 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 all other like empowered.

SIGNATURE: FRANK D. THOMPSON

PD

02/26/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date