


**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 15, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # N01000006541**

1. Entity Name  
 780 FIFTH AVENUE SOUTH CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business 365 FIFTH AVENUE SOUTH, SUITE 201 NAPLES, FL 34102	Mailing Address 365 FIFTH AVENUE SOUTH, SUITE 201 NAPLES, FL 34102
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**DO NOT WRITE IN THIS SPACE**



04122004 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-3750070	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CHEFFY, LOUIS W  
 CHEFFY & PASSIDOMO  
 821 FIFTH AVENUE SOUTH, SUITE 201  
 NAPLES, FL 34102

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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)

**Filing Fee is \$61.25**  
**Due by May 1, 2004**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

04/15/04-80017-023 61.25

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	ANTARAMIAN, JACK J
STREET ADDRESS	365 FIFTH AVENUE SOUTH, SUITE 201
CITY - ST - ZIP	NAPLES, FL 34102
TITLE	D
NAME	GIBSON, GREG
STREET ADDRESS	750 5TH AVENUE S. #203
CITY - ST - ZIP	NAPLES, FL 34102
TITLE	D
NAME	FRAZITTA, ROBERT M
STREET ADDRESS	365 FIFTH AVENUE SOUTH, SUITE 201
CITY - ST - ZIP	NAPLES, FL 34102
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: Jack Antaramian Jack Antaramian 04/13/04 239 438-6222  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #