2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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May 03, 2007 08:00 A Secretary of State

TRIESTE INC.	I AT VASARI CONDOMINIU	IM ASSOCIATION,							
9411 CYPRESS LAKE DRIVE 9411 SUITE 2 SUITI		Meiling Address 9411 CYPRESS LAKE DI SUITE 2 FORT MYERS, FL 3391				11 6 1 1811 1814 1811 18		IA 11881 11818 BI	
2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			01092007	Chg-NP	CR2E03	7 (12/06)	
City & Stat	е	City & State			4. FEI Number 04-3609				oplied For ot Applicable
Zìp	Country	Zìp	Coun	ntry	5. Certificate o	f Status Desired		\$8.75 Add	
	6. Name and Address of Current R	egistered Agent			7. Name and	Address of New I	Registered A	gent	
GELLES I	ROBERT E		ŀ	Name					
C/O SCHO	OO MANAGEMENT RESS LAKE DRIVE, SUITE 2		Street A		(P.O. Box Number	is Not Acceptab	le)		
	ERS, FL 33919								
				City			FL	Zip Cod	0
	named entity submits this statement for ions of registered agent.	the purpose of changing its	registered	d office or register	red agent, or both	, in the State of F	lorida. I am f	amiliar with,	and accept
SIGNATURE.	Signature, typed or printed name of registered agent ar	nd title if applicable (NOTE	: Registered	Agent signature required	d when reinstating)		DATE		
	•								
	Filing Fee is \$61.25 Due by May 1, 2007	9. Election Cam Trust Fund C	_	· ~	\$5.00 May Be Added to Fees		lake check rida Depart	payable to ment of S	
10.		Trust Fund C	_	on.		r) Flo	rida Depart	payable to	tate
TITLE	OFFICERS AND DIRI	Trust Fund C	11.	on.	Added to Fees ADDITIONS/CHA	Flo NGES TO OFFICE	rida Depart	ment of S	110
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I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: