

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006108

FILED  
Jan 07, 2009  
Secretary of State

**Entity Name:** NORTH ALICO PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

19091 TAMIAMI TRAIL SE  
FORT MYERS, FL 33908

**New Principal Place of Business:**

17041 ALICO COMMERCE COURT  
SUITE 1  
FORT MYERS, FL 33967 US

**Current Mailing Address:**

19091 TAMIAMI TRAIL SE  
FORT MYERS, FL 33908

**New Mailing Address:**

17041 ALICO COMMERCE COURT  
SUITE 1  
FORT MYERS, FL 33967 US

**FEI Number:** 47-0920737

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FREEMAN, PAUL H  
19091 TAMIAMI TRAIL SE  
FORT MYERS, FL 33908 US

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

FREEMAN, PAUL H  
17041 ALICO COMMERCE COURT  
SUITE 1  
FORT MYERS, FL 33967 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:

01/07/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PSD ( ) Delete  
Name: FREEMAN, ALAN C  
Address: 19091 TAMIAMI TRAIL SE  
City-St-Zip: FORT MYERS, FL 33908

Title: D ( ) Delete  
Name: ENNEN, WILLIAM G  
Address: 19091 TAMIAMI TRAIL SE  
City-St-Zip: FORT MYERS, FL 33908

Title: VTD ( ) Delete  
Name: FREEMAN, PAUL H  
Address: 1840 WEST 49TH STREET #410  
City-St-Zip: HIALEAH, FL 33012

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

Title: PSD (X) Change ( ) Addition  
Name: FREEMAN, ALAN C  
Address: 17041 ALICO COMMERCE COURT, STE 1  
City-St-Zip: FORT MYERS, FL 33967

Title: D (X) Change ( ) Addition  
Name: ENNEN, WILLIAM G  
Address: 17041 ALICO COMMERCE COURT, STE. 1  
City-St-Zip: FORT MYERS, FL 33967

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

I hereby certify that the information supplied with this filing does not qualify 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: ALAN C. FREEMAN

PSD

01/07/2009

Electronic Signature of Signing Officer or Director

Date