## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000006201

Apr 18, 2005 Secretary of State

Entity Name: THE TIB FINANCIAL CENTER CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

2180 IMMOKALEE RD 2180 IMMOKALEE RD 309 308

NAPLES, FL 34110

NAPLES, FL 34110

**New Mailing Address: Current Mailing Address:** 

2180 IMMOKALEE RD 2180 IMMOKALEE RD

NAPLES, FL 34110 NAPLES, FL 34110

FEI Number: 22-3864640 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

KLOHN, WILLIAM KLOHN, WILLIAM 2180 IMMOKALEE RD 2180 IMMOKALEE RD 309 308 NAPLES, FL 34110 US NAPLES, FL 34110 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: 04/18/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete

KLOAN, WILLIAM L KLOAN, WILLIAM L Name: Name: Address: 2180 IMMOKALEE ROAD STE 308 Address: 2180 IMMOKALEE ROAD STE 309

City-St-Zip: NAPLES, FL 34110 City-St-Zip: NAPLES, FL 34110

Title: () Delete Title: (X) Change ( ) Addition

Name: LARSON, DENISE Name: LARSON, DENISE

Address: 2180 IMMOKALEE ROAD STE 308 Address: 2180 IMMOKALEE ROAD STE 309

City-St-Zip: NAPLES, FL 34110 City-St-Zip: NAPLES, FL 34110

Title: () Delete Title: (X) Change ( ) Addition MCCUAN, W. PATRICK MCCUAN, W. PATRICK Name: Name:

2180 IMMOKALEE ROAD STE 308 2180 IMMOKALEE ROAD STE 309 Address: Address:

City-St-Zip: NAPLES, FL 34110 City-St-Zip: NAPLES, FL 34110

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WILLIAM L. KLOHN D 04/18/2005