


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 17, 2006 08:00 AM
Secretary of State

DOCUMENT # N02000006541 1. Entity Name CITIZENS NATIONAL BANK CENTER CONDOMINIUM ASSOCIATION, INC.	
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Principal Place of Business 3606 ENTERPRISE AVE NAPLES, FL 34104	Mailing Address P.O. BOX 8537 NAPLES, FL 34101
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DO NOT WRITE IN THIS SPACE



03062006 No Chg-NP CRZE037 (11/05)

4. FEI Number 22-3869409	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent PREVOLOS, DEAN 1250 TAMiami TRAIL NORTH # 304 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's signature required when re-registering) DATE _____

Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	000000472508 03/29/06-80039-014 61.25
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10. OFFICERS AND DIRECTORS	
TITLE	D
NAME	BARBER, DONALD R
STREET ADDRESS	3606 ENTERPRISE AVE
CITY-ST-ZIP	NAPLES, FL 34104
TITLE	D
NAME	COX, JOE B
STREET ADDRESS	3001 NORTH TAMiami TRIAL
CITY-ST-ZIP	NAPLES, FL 34103
TITLE	D
NAME	HOLE, STANLEY
STREET ADDRESS	950 ENCORE WAY
CITY-ST-ZIP	NAPLES, FL 34110
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE

12. 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:  **March 8, 2006** 239-425-9797
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #