

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008907

FILED
Apr 12, 2005
Secretary of State

Entity Name: MANGO CREEK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

801 12TH AVE SOUTH
SUITE 300
NAPLES, FL 34102

New Principal Place of Business:

27684 IMPERIAL RIVER ROAD
BONITA SPRINGS, FL 34134

Current Mailing Address:

801 TWELTH AVENUE SOUTH
STE 300
NAPLES, FL 34102

New Mailing Address:

PO BOX 2171
BONITA SPRINGS, FL 34133

FEI Number: 81-0594698

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIEBERFARB, STANLEY J
1100 FIFTH AVENUE SOUTH STE 405
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

CODI, ALAN E
3450 CARTWRIGHT CT.
BONITA SPRINGS, FL 34134 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: ALAN CODI

04/12/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SCHRYVER, KENNEY
Address: 686 15TH AVE. S.
City-St-Zip: NAPLES, FL 34102

Title: DVP () Delete
Name: DAVIS, MICK
Address: 3876 BONITA BEACH RD.
City-St-Zip: BONIT SPRINGS, FL 34134

Title: D () Delete
Name: SCANDALE, LEWIS
Address: 3876 BONITA BEACH RD
City-St-Zip: BONITA SPRINGS, FL 34134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: DAVIS, MICHAEL J
Address: 4450 BONITA BEACH ROAD
City-St-Zip: BONITA SPRINGS, FL 34134

Title: DVP (X) Change () Addition
Name: INNES, ROBERT L
Address: 837 COUNTY RD. 19 N
City-St-Zip: MAPLE PLAIN, MN 55359

Title: T/S (X) Change () Addition
Name: CODI, ALAN E
Address: 3450 CARTWRIGHT CT.
City-St-Zip: BONITA SPRINGS, FL 34134

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: ALAN CODI

T/S

04/12/2005

Electronic Signature of Signing Officer or Director

Date