

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009700

FILED
Apr 30, 2007
Secretary of State

Entity Name: CONCERNED CITIZENS OF BAYSHORE COMMUNITY, INC.

Current Principal Place of Business:

PO BOX 51033
FT. MYERS, FL 33994

New Principal Place of Business:

8200 BOONESBORO ROAD
NORTH FORT MYERS, FL 33917

Current Mailing Address:

PO BOX 51033
FT. MYERS, FL 33994

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HANNONG, BILL
8200 BOONESBORO ROAD
NORTH FT. MYERS, FL 33917 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ALVAREZ, LAURA
Address: 18900 LYNN RD.
City-St-Zip: N. FT. MYERS, FL 33917

Title: VD () Delete
Name: SMITH, II, MARVEN M
Address: 9801 W. BAHIA VISTA
City-St-Zip: N. FT. MYERS, FL 33917

Title: SD () Delete
Name: JACKOW, DEBORAH
Address: 19450 MEREDITH RD.
City-St-Zip: N. FT. MYERS, FL 33917

Title: TD () Delete
Name: RODD, BARBARA
Address: 11500 BAYSHORE ROAD
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: D () Delete
Name: TRAURIG, SHELLEY
Address: 8200 HENDERSON
City-St-Zip: N. FT. MYERS, FL 33917

Title: D () Delete
Name: HANNONG, BILL
Address: 8200 BOONESBORO RD.
City-St-Zip: N. FT. MYERS, FL 33917

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SMITH, II, MARVEN M
Address: 9801 W. BAHIA VISTA
City-St-Zip: N. FT. MYERS, FL 33917

Title: VD (X) Change () Addition
Name: JACKOW, DEBORAH
Address: 19450 BEREDITH RD.
City-St-Zip: N. FT. MYERS, FL 33917

Title: SD (X) Change () Addition
Name: KAMENER, KAREN
Address: 20777 BRADLEY RD
City-St-Zip: N. FT. MYERS, FL 33917

Title: TD (X) Change () Addition
Name: RODD, BARBARA J
Address: 11520 BAYSHORE ROAD
City-St-Zip: NORTH FORT MYERS, FL 33917

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

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: BARBARA J. RODD

TREA

04/30/2007

Electronic Signature of Signing Officer or Director

Date