
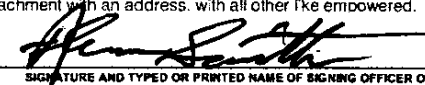


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 02, 2006 8:00 am**  
**Secretary of State**

05-02-2006 90165 003 \*\*\*\*61.25

<b>DOCUMENT # N04000003117</b> 1. Entity Name <b>ALTESSA III AT VASARI CONDOMINIUM ASSOCIATION, INC.</b>					
Principal Place of Business <b>TAYLOR WOODROW</b> <b>8430 ENTERPRISE CIRCLE, SUITE 100</b> <b>BRADENTON, FL 34202-4108</b>			Mailing Address <b>TAYLOR WOODROW</b> <b>8430 ENTERPRISE CIRCLE, SUITE 100</b> <b>BRADENTON, FL 34202-4108</b>		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number <b>20-1945228</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent <b>SPENCER, MARC I</b> <b>877 EXECUTIVE CENTER DRIVE WEST</b> <b>SUITE 205</b> <b>ST. PETERSBURG, FL 33702-2472</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City State <b>FL</b> Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and title (if applicable). (NOTE: Registered Agent signature required when registering)</small>					
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be</b> <b>Added to Fees</b>	
<b>Make check payable to</b> <b>Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD <b>SMITH, ALAN B</b> <b>2950 IMMOKALEE ROAD SUITE 2</b> <b>NAPLES, FL 34110</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D <b>FICHTER, THOMAS P</b> <b>2950 IMMOKALEE ROAD SUITE 2</b> <b>NAPLES, FL 34110</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	ST <b>BAKAN, STEVEN A</b> <b>8430 ENTERPRISE CIRCLE, SUITE 100</b> <b>BRADENTON, FL 34202</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	AS <b>SPENCER, MARC I ASST</b> <b>877 EXECUTIVE CENTER DR WEST #205</b> <b>ST. PETERSBURG, FL 337022472</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D <b>WHITMORE, JAMES A</b> <b>8430 ENTERPRISE CIRCLE, SUITE 100</b> <b>BRADENTON, FL 34202</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 I'm empowered.					
<b>SIGNATURE:</b>  <b>Alan Smith</b> <b>4/11/06</b> <b>(239) 481-4700</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					