. 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2007 08:00 AM
Secretary of State

DOCUMENT # N04000004518

1. Entity Name
THE NAPLES BIG CYPRESS INDUSTRIAL PARK CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
720 GOODLETTE RD STE 305 NAPLES, FL 34103	720 GOODLETTE RD STE 305 NAPLES, FL 34103

01292007 No Chg-NP CR2E037 (4/06)

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4. FEI Number
20-1115309
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BASIK, KEITH
720 GOODLETTE RD STE 305
NAPLES, FL 34103

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	BASIK, KEITH
STREET ADDRESS	720 GOODLETTE RD STE 305
CITY-ST-ZIP	NAPLES, FL 34103
TITLE	D
NAME	BASIK, JEFF
STREET ADDRESS	720 GOODLETTE RD STE 305
CITY-ST-ZIP	NAPLES, FL 34103
TITLE	D
NAME	BASIK, LARRY
STREET ADDRESS	720 GOODLETTE RD STE 305
CITY-ST-ZIP	NAPLES, FL 34103
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/07/07-80017-024 61.25

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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: _____ 2-1-07 239-262-3210
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #