## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000005651

FILED Mar 09, 2007 Secretary of State

Entity Name: CHARLOTTE COUNTY AIRPARK HANGARS BUILDING B CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:** 

New Principal Place of Business:

3073 HORSESHOE DR SUITE 118 NAPLES, FL 34104

28390 CHALLENGER BLVD., BLDG. B

PUNTA GORDA, FL 33948

**Current Mailing Address:** 

**New Mailing Address:** 

3073 HORSESHOE DR SUITE 118 NAPLES, FL 34104

P.O. BOX 512095

PUNTA GORDA, FL 33951-209

FEI Number: 51-0541774

NAPLES, FL 34104

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

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ANDERSON, RAY 3073 HORSÉSHOE DR SUITE 118 RHINEHART, WENDELL E PRES 2517 SW 39TH TERRACE

CAPE CORAL, FL 33914

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: WENDELL ERIC RHINEHART

03/09/2007

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

() Delete

VETTER, RICHARD Name:

3073 HORSESHOE DR SUITE 118 Address:

City-St-Zip: NAPLES, FL 34104

Title: () Delete Name: ARNOLD, DONALD

Address: 3073 HORSESHOE DR SUITE 118

City-St-Zip: NAPLES, FL 34104

Title: () Delete

ANDERSON, RAY Name: 3073 HORSESHOE DR SUITE 118 Address:

City-St-Zip: NAPLES, FL 34104 Address: 2517 SW 39TH TERRACE City-St-Zip: CAPE CORAL, FL 33914

Name:

Title:

(X) Change ( ) Addition

RHINEHART, WENDELL E

Name: HOFMEISTER, LAURENCE C

Address: 338 CAICOS DRIVE

City-St-Zip: PUNTA GORDA, FL 33950

Title: (X) Change ( ) Addition MALONEY, MATHEW Name:

29190 PALM SHORES DRIVE Address: City-St-Zip: PORT CHARLOTTE, FL 33949

I hereby certify that the information supplied with this filing does not qualify for the 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: WENDELL ERIC RHINEHART

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03/09/2007