

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006415

FILED
Apr 19, 2007
Secretary of State

Entity Name: 11177 MANAGEMENT CORPORATION

Current Principal Place of Business:

C/O KNIGHT OF COLUMBUS COUNCIL 11177
1922 SW 20TH AVENUE
CAPE CORAL, FL 33991

New Principal Place of Business:

Current Mailing Address:

C/O KNIGHT OF COLUMBUS COUNCIL 11177
1922 SW 20TH AVENUE
CAPE CORAL, FL 33991

New Mailing Address:

FEI Number: 20-1320048

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHWARTZ, JEROME K
4803-11 SW SANTA BARBARA COURT
CAPE CORAL, FL 33914 US

Name and Address of New Registered Agent:

REED, PETER
1311 SE 45TH STREET
CAPE CORAL, FL 33904 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: PETER REED

04/19/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: SCHWARTZ, JEROME K
Address: 4803-11 SW SANTA BARBARA COURT
City-St-Zip: CAPE CORAL, FL 33914

Title: D () Delete
Name: FENERTY, CHARLES J
Address: 2515 NW 14TH TERRACE
City-St-Zip: CAPE CORAL, FL 33993

Title: D () Delete
Name: SNYDER, ROBERT G
Address: 1008 SW 4TH PLACE
City-St-Zip: CAPE CORAL, FL 33991

Title: D (X) Delete
Name: MONSRUD, MYRON D
Address: PO BOX 15703
City-St-Zip: CAPE CORAL, FL 33915

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: REED, PETER
Address: 1311 SE 45TH STREET
City-St-Zip: CAPE CORAL, FL 33904 US

Title: D (X) Change () Addition
Name: GOBLE SR, WILLIAM
Address: 4727 SW 25TH COURT
City-St-Zip: CAPE CORAL, FL 33914

Title: D (X) Change () Addition
Name: DELORENZO, FRANK
Address: 240 SE 6TH STREET
City-St-Zip: CAPE CORAL, FL 33990

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

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: PETER REED

CD

04/19/2007

Electronic Signature of Signing Officer or Director

Date