## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000001361

FILED Mar 30, 2010 Secretary of State

Entity Name: NORTH PORT WAREHOUSE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:** New Principal Place of Business:

3073 HORSESHOE DRIVE SOUTH SUITE 118 3073 HORSESHOE DRIVE SOUTH NAPLES, FL 34104

SUITE 118

NAPLES, FL 34104

**Current Mailing Address: New Mailing Address:** 

3073 HORSESHOE DRIVE SOUTH SUITE 118 3073 HORSESHOE DRIVE SOUTH

NAPLES, FL 34104 SUITE 118

NAPLES, FL 34104

FEI Number: 06-1742340 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:

ARNOLD, DONALD L ARNOLD, DONALD L 3073 HOŔSESHOE DR SOUTH 3073 HORSESHOE DR ST STE 118

NAPLES, FL 34104 SUITE 118 NAPLES, FL 34104 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: DONALD L. ARNOLD 03/30/2010

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

DPT

ARNOLD, DONALD L Name:

Address: 3073 HORSESHOE DRIVE SOUTH SUITE 118

City-St-Zip: NAPLES, FL 34104

Title: DVS

Name: JEPPESEN, MICHAEL W

Address: 3073 HORSESHOE DRIVE SOUTH SUITE 118

City-St-Zip: NAPLES, FL 34104

Title:

BYRD, GREG Name:

5247 HICKORY WOOD DRIVE Address:

City-St-Zip: NAPLES, FL 34119

I hereby 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 all other like empowered.

DPT SIGNATURE: DONALD L. ARNOLD 03/30/2010