

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

06 JUL 20 AM 9:19



<b>DOCUMENT # N05000004612</b> 1. Entity Name <b>THE COTTAGES AT NAPLES BAY RESORT CONDOMINIUM ASSOCIATION, INC.</b>					
Principal Place of Business <b>C/O 365 FIFTH AVENUE SOUTH STE 201 NAPLES, FL 34102</b>			Mailing Address <b>C/O 365 FIFTH AVENUE SOUTH STE 201 NAPLES, FL 34102</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>20-5185945</b>	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
<b>HASTINGS, CHERYL L ESQ. GRANT, FRIDKIN, PEARSON, ATHAN &amp; CROWN, P.A. 5551 RIDGEWOOD DRIVE STE 501 NAPLES, FL 34108</b>			Name  Street Address (P.O. Box Number is Not Acceptable)  City <div style="text-align: right;"><b>FL</b></div> 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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____					
<b>Filing Fee is \$61.25 Due by May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
Make check payable to <b>Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '06		
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BABER, JACK L	NAME			
STREET ADDRESS	365 FIFTH AVE SOUTH, STE 201	STREET ADDRESS			
CITY- ST- ZIP	NAPLES, FL 34102	CITY- ST- ZIP			
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	CARROLL, PETER	NAME			
STREET ADDRESS	365 FIFTH AVE SOUTH, STE 201	STREET ADDRESS			
CITY- ST- ZIP	NAPLES, FL 34102	CITY- ST- ZIP			
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	THOMAS, CHARLES	NAME			
STREET ADDRESS	365 FIFTH AVE SOUTH, STE 201	STREET ADDRESS			
CITY- ST- ZIP	NAPLES, FL 34102	CITY- ST- ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY- ST- ZIP		CITY- ST- ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY- ST- ZIP		CITY- ST- ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY- ST- ZIP		CITY- ST- ZIP			
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 life empowered.					
SIGNATURE: _____		4/7/06 239-134-0600 Date			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

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To: Division of Corporations  
PO Box 1500  
Tallahassee, FL 32302-1500

From: The Cottages at Naples Bay Resort Condominium Association, Inc  
365 Fifth Avenue South, Suite 201  
Naples, FL 34102

July 18, 2006

Dear Sir or Madam,

We received a notice of intent to dissolve The Cottages at Naples Bay Resort Condominium Association, Inc. We filed the 2006 Corporation Annual Report and send you check #60162, covering the filing fee of \$61.25 and the additional fee of \$8.75. We are sending you copy of the check, back and front, showing that it cleared the bank.

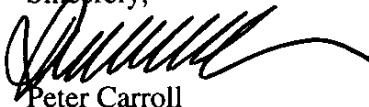
We do not wish to dissolve The Cottages at Naples Bay Resort Condominium Association, Inc, so please let us know what additional information you will need to keep the entity in good standing.

The FEI of The Cottages at Naples Bay Resort Condominium Association, Inc is 20-5185945.

Please, give us a call if you need any additional information.

Thank you!

Sincerely,



Peter Carroll

Director

The Cottages at Naples Bay Resort Condominium Association, Inc  
239-434-0600  
pcarroll@adg-naples.com