

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006308

FILED
Apr 22, 2008
Secretary of State

Entity Name: ENTERPRISE DESIGN CENTER MASTER ASSOCIATION, INC.

Current Principal Place of Business:

4001 TAMIAMI TRAIL NORTH STE 350
NAPLES, FL 34103

New Principal Place of Business:

C/O R&P PROPERTY MANAGEMENT
265 AIRPORT RD S
NAPLES, FL 34103

Current Mailing Address:

4001 TAMIAMI TRAIL NORTH STE 350
NAPLES, FL 34103

New Mailing Address:

C/O R&P PROPERTY MANAGEMENT
265 AIRPORT RD S
NAPLES, FL 34103

FEI Number: 20-3035390

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

R & P PROPERTY MANAGEMENT
265 AIRPORT RD S
NAPLES, FL 34104 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: LUND, T. CHADWICK
Address: 4001 TAMIAMI TRAIL N STE 350
City-St-Zip: NAPLES, FL 34103

Title: VPD () Delete
Name: LUND, THOMAS
Address: 4001 TAMIAMI TRAIL N STE 350
City-St-Zip: NAPLES, FL 34103

Title: TSD () Delete
Name: STORY, JACK
Address: 4001 TAMIAMI TRAIL N STE 350
City-St-Zip: NAPLES, FL 34103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: CHAD LUND

PD

04/22/2008

Electronic Signature of Signing Officer or Director

Date