

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006698

FILED
Apr 30, 2011
Secretary of State

Entity Name: THE EGRET CONDOMINIUM ASSOCIATION OF BONITA SPRINGS, INC.

Current Principal Place of Business:

C/O GULF BREEZE MGMT. SVCS., LLC
87910 TERRENE COURT, SUITE 200
BONITA SPRINGS, FL 34135 US

New Principal Place of Business:

C/O GULF BREEZE MGMT. SVCS., LLC
8910 TERRENE COURT, SUITE 200
BONITA SPRINGS, FL 34135 US

Current Mailing Address:

C/O GULF BREEZE MGMT. SVCS., LLC
87910 TERRENE COURT, SUITE 200
BONITA SPRINGS, FL 34135 US

New Mailing Address:

C/O GULF BREEZE MGMT. SVCS., LLC
8910 TERRENE COURT, SUITE 200
BONITA SPRINGS, FL 34135 US

FEI Number: 59-1512167

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:

WEIDNER, RALPH L CAM
%GULF BREEZE MGMT. SVCS., LLC
8910 TERRENE COURT, SUITE 200
BONITA SPRINGS, FL 34135 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: MCMAHON, GLORIA
Address: 26340 HICKORY BLVD., #601
City-St-Zip: BONITA SPRINGS, FL 34134

Title: TD
Name: TRANQUILLA, DAVID
Address: 28742 MEGAN DRIVE
City-St-Zip: BONITA SPRINGS, FL 34135

Title: SD
Name: DAHLSTROM, SUE
Address: 26340 HICKORY BLVD., #402
City-St-Zip: BONITA SPRINGS, FL 34134

Title: D
Name: PEDISICH, SHEILA
Address: 28356 CREEK BRANCH LANE
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D
Name: COPE, LANIS
Address: 26340 HICKORY BLVD., #905
City-St-Zip: BONITA SPRINGS, FL 34135

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.

SIGNATURE: GLORIA MCMAHON

PRES

04/30/2011

Electronic Signature of Signing Officer or Director

Date