2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009778

FILED May 02, 2007 Secretary of State

Entity Name: CONDOMINIUM V AT BARLETTA ASSOCITION, INC.

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

10481 SIX MILE CYPRESS PKWY 11691 GATEWAY BLVD. 203

FT MYERS, FL 33912

FT MYERS, FL 33913

Current Mailing Address: New Mailing Address:

11691 GATEWAY BLVD. SUITE 203 FT MYERS, FL 33913

FEI Number: 20-4889712 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SHIELDS, CHRISTOPHER J S & S GOLF MANAGEMENT, INC. 1833 HENDRY ST 11691 GATEWAY BLVD. FT MYERS, FL 33901 US 203 FT MYERS, FL 33913 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: REBECCA SARVER 05/02/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

SORENSEN, ANDREW DELUCA, JEANNE Name: Name:

10481 SIX MILE CYPRESS PKWY Address: 19981 BARLETTA LANE, #1825 Address:

ESTERO, FL 33928 City-St-Zip: FT MYERS, FL 33912 City-St-Zip:

Title: (X) Delete Title: () Change () Addition

Name: DEVEREAUX, MATTHEW Name: Address: 10481 SIX MILE CYPRESS PKWY Address: City-St-Zip: FT MYERS, FL 33912 City-St-Zip:

Title: STD (X) Delete Title: () Change () Addition

HAGAN, JOHN Name: Name: 10481 SIX MILE CYPRESS PKWY Address: Address: City-St-Zip: FT MYERS, FL 33912 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: JEANNE DELUCA PD 05/02/2007