

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010232

FILED
Apr 19, 2007
Secretary of State

Entity Name: CATALINA CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

12810 TAMIAMI TRAIL NORTH
NAPLES, FL 34110

New Principal Place of Business:

Current Mailing Address:

12709 TAMIAMI TR. E.
NAPLES, FL 34113

New Mailing Address:

FEI Number: 20-3992117

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, STEPHEN V
12810 TAMIAMI TRAIL NORTH
NAPLES, FL 34110 US

Name and Address of New Registered Agent:

GATES, TODD E
12810 TAMIAMI TRAIL NORTH
NAPLES, FL 34110 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: TODD E GATES

04/19/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ROBISON, STEPHEN V
Address: 12810 TAMIAMI TRAIL NORTH
City-St-Zip: NAPLES, FL 34110

Title: D () Delete
Name: GATES, TODD E
Address: 12810 TAMIAMI TRAIL NORTH
City-St-Zip: NAPLES, FL 34110

Title: D (X) Delete
Name: SISCO, JEANETTE
Address: 12810 TAMIAMI TRAIL NORTH
City-St-Zip: NAPLES, FL 34110

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GATES, TODD E
Address: 12810 TAMIAMI TRAIL NORTH
City-St-Zip: NAPLES, FL 34110

Title: D (X) Change () Addition
Name: SISCO, JEANETTE
Address: 12810 TAMIAMI TRAIL NORTH
City-St-Zip: NAPLES, FL 34110

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

I hereby certify that the information supplied with this filing does not qualify for the 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: TODD E GATES

D

04/19/2007

Electronic Signature of Signing Officer or Director

Date