

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 08, 2006 8:00 am
Secretary of State

05-08-2006 90274 031 ****61.25

DOCUMENT # N05000010330
 1. Entity Name
THE PRESERVE AT COLONIAL SECTION I CONDOMINIUM ASSOCIATION, INC.



40086720



Principal Place of Business
 % PULTE HOME CORPORATION
 9148 BONITA BEACH RD - STE 102
 BONITA SPRINGS, FL 34135

Mailing Address
 % PULTE HOME CORPORATION
 9148 BONITA BEACH RD - STE 102
 BONITA SPRINGS, FL 34135

04052006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business
c/o Integrated Property Mgmt.

3. Mailing Address
c/o Integrated Property Mgmt.

Suite, Apt. #, etc.
3435 - 10th Street N., #201

Suite, Apt. #, etc.
3435 - 10th Street N., #201

City & State
Naples, FL

City & State
Naples, FL

4. FEI Number
20-3907874

Applied For
 Not Applicable

Zip
34103

Country

Zip
34103

Country

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

STACKHOUSE, EDWIN
 % PULTE HOME CORPORATION
 9148 BONITA BEACH RD - STE 102
 BONITA SPRINGS, FL 34135

7. Name and Address of New Registered Agent

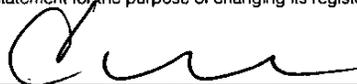
Name
Shields, Christopher J.

Street Address (P.O. Box Number is Not Acceptable)
1833 Hendry Street

PO Drawer 1507

City
Ft. Myers, FL 33902 FL 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  DATE **4/15/06**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD STACKHOUSE, EDWIN D %PULTE HOME CORP-9148 BONITA BACH RD-# 102 BONITA SPRINGS, FL 34135	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD MEEKS, W. MICHAEL %PULTE HOME CORP-9148 BONITA BACH RD-# 102 BONITA SPRINGS, FL 34135	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD RAY, LAURA %PULTE HOME CORP-9148 BONITA BACH RD-# 102 BONITA SPRINGS, FL 34135	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Ginsberg, Elaine 9563 Hemingway Lane #4506 Ft. Myers, FL 33913	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP Grondin, Heather 9583 Hemingway Lane #4309 Ft. Myers, FL 33913	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST Theisen, Tim 12941-73rd Avenue Maple Grove, MN 55369	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 like empowered.

SIGNATURE:  DATE **4-28-06** Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR