

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 05, 2006 8:00 am
Secretary of State

04-11-2006 90117 015 ****61.25

DOCUMENT # N05000011923			
1. Entity Name THE ENCLAVE AT PALMIRA VII CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 28341 S. TAMiami TRAIL SUITE 4 BONITA SPRINGS, FL 34134		Mailing Address 28341 S. TAMiami TRAIL SUITE 4 BONITA SPRINGS, FL 34134	
2. Principal Place of Business		3. Mailing Address 10621 Airport Rd N	
Suite, Apt. #, etc.		Suite, Apt. #, etc. Suite #8	
City & State		City & State NAPLES FL	
Zip	Country	Zip	Country
34109	USA	34109	USA
6. Name and Address of Current Registered Agent MATHIASON, MARION P 500 EAST KENNEDY BLVD. SUITE 200 TAMPA, FL 33602		7. Name and Address of New Registered Agent Robert Titus C/O American Property Mgt 10621 Airport Rd N #8 Naples FL 34109	
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: <u><i>Robert Titus Managing Agent</i></u> DATE: <u>4/6/06</u> Signature (type or print name of registered agent and date if applicable) (NOTE: Registered Agent signature required when registering)			
Filing Fee is \$81.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP GRASSER, MARK 28341 S. TAMiami TRAIL SUITE 4 BONITA SPRINGS, FL 34134 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVP TORRES, DAVID 28341 S. TAMiami TRAIL SUITE 4 BONITA SPRINGS, FL 34134 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DST BOCZULAK, RYAN 28341 S. TAMiami TRAIL SUITE 4 BONITA SPRINGS, FL 34134 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ 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 empowerment.			
SIGNATURE: <u><i>Robert Titus Managing Agent</i></u>		Date: <u>4/6/06</u> 239-596-1886	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

66021256



02142008 Chg-NP CR2E037 (11/05)

4. FEI Number **20-4093651**
30-3401089
Applied For ☐ Not Applicable

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