2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 13, 2008
Secretary of State

DOCUMENT# N06000002360

Entity Name: ALICO INDUSTRIAL ESTATES OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

4110 ENTERPRISE AVENUE, SUITE 214
NAPLES, FL 34104

New Principal Place of Business:

Current Mailing Address:

4110 ENTERPRISE AVENUE, SUITE 214
NAPLES, FL 34104

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **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:

SULLIVAN, WILLIAM H
4110 ENTERPRISE AVENUE, SUITE 214
NAPLES, FL 34104 US

Name and Address of New Registered Agent:

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:	DP ( ) Delete
Name:	BRAVERMAN, NEIL
Address:	4110 ENTERPRISE AVENUE, SUITE 214
City-St-Zip:	NAPLES, FL 34104
Title:	DVP ( ) Delete
Name:	VAN METER, WILLIAM B
Address:	4110 ENTERPRISE AVENUE, SUITE 214
City-St-Zip:	NAPLES, FL 34104
Title:	DVPT ( ) Delete
Name:	GRAFFY, PHILLIP
Address:	4110 ENTERPRISE AVENUE, SUITE 214
City-St-Zip:	NAPLES, FL 34104
Title:	S ( ) Delete
Name:	GRAFFY, PHILLIP
Address:	4110 ENTERPRISE AVENUE, SUITE 214
City-St-Zip:	NAPLES, FL 34104

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
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: NEIL K BRAVERMAN   DP   05/13/2008
Electronic Signature of Signing Officer or Director   Date