

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009348

FILED
Mar 09, 2009
Secretary of State

Entity Name: T.C. ONE COMMERCIAL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

500 MISTY PINES CIRCLE
#204
NAPLES, FL 34105

New Principal Place of Business:

7736 CITRUS HILL LANE
NAPLES, FL 34109

Current Mailing Address:

500 MISTY PINES CIRCLE
#204
NAPLES, FL 34105

New Mailing Address:

7736 CITRUS HILL LANE
NAPLES, FL 34109

FEI Number: 90-0298434

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEARL, CARMINE
500 MISTY PINES CIRCLE #204
NAPLES, FL 34105 US

Name and Address of New Registered Agent:

PEARL, CARMINE J
7736 CITRUS HILL LANE
NAPLES, FL 34109 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: CARMINE J. PEARL

03/09/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STAHLMAN, JOANNE
Address: 2063 TRADE CENTER WAY
City-St-Zip: NAPLES, FL 34109

Title: VPS () Delete
Name: THOMPSON, BONNA
Address: 2049 TRAPOE CONTIER WAY
City-St-Zip: NAPLES, FL 34109

Title: S () Delete
Name: DAHLKA, RICHARD
Address: 2051 TRAPO CONTIER WAY
City-St-Zip: NAPLES, FL 34109

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPS (X) Change () Addition
Name: THOMPSON, BONNA
Address: 2049 TRADE CENTER WAY
City-St-Zip: NAPLES, FL 34109

Title: D (X) Change () Addition
Name: WOOD, STUART
Address: 372 CYPRESS WAY W
City-St-Zip: NAPLES, FL 34109

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: JOANNE STAHLMAN

P

03/09/2009

Electronic Signature of Signing Officer or Director

Date