2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011526

FILED Mar 09, 2007 Secretary of State

Entity Name: COCONUT TRACE OWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

4081 TAMIAMI TRAIL NORTH, SUITE C-201 4081 TAMIAMI TRAIL NORTH, SUITE C-105 NAPLES, FL 34103

NAPLES, FL 34103

Current Mailing Address: New Mailing Address:

4081 TAMIAMI TRAIL NORTH, SUITE C-105 4081 TAMIAMI TRAIL NORTH, SUITE C-201

NAPLES, FL 34103 NAPLES, FL 34103

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LYNCH, DENNIS J LYNCH, DENNIS J

4081 TAMIAMI TRAIL NORTH, SUITE C-201 4081 TAMIAMI TRAIL NORTH, SUITE C-105

NAPLES, FL 34103 NAPLES, FL 34103

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: 03/09/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

LYNCH, DENNIS J LYNCH, DENNIS J Name: Name:

4081 TAMIAMI TRAIL NORTH, SUITE C-201 Address: 4081 TAMIAMI TRAIL NORTH, SUITE C-105 Address: City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 34103

Title: () Delete Title: (X) Change () Addition LYNCH, CHRISTOPHER Name: LYNCH, CHRISTOPHER Name:

Address: 4081 TAMIAMI TRAIL NORTH, SUITE C-201 Address: 4081 TAMIAMI TRAIL NORTH, SUITE C-105

City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 34103

Title: () Delete Title: (X) Change () Addition DOMINGO, N. BING Name: DOMINGO, N. BING Name:

4081 TAMIAMI TRAIL NORTH, SUITE C-201 4081 TAMIAMI TRAIL NORTH, SUITE C-105 Address: Address:

City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 34103

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: DENNIS J. LYNCH DP 03/09/2007