## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000011848

FILED Apr 24, 2007 Secretary of State

Entity Name: GOODLETTE CORNERS LAND CONDOMINIUM ASSOCIATION, INC.

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

800 FRONTAGE ROAD NORTHFIELD, IL 60093

Current Mailing Address: New Mailing Address:

800 FRONTAGE ROAD NORTHFIELD, IL 60093

FEI Number: 20-8897520 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

GRABINSKI, MATTHEW L GOODLETTE, COLEMAN & JOHNSON, P.A. 4001 TAMIAMI TRAIL NORTH, SUITE 300 NAPLES, FL 34103 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:

Flateric Constant Devices Advantage

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete Title: PSD (X) Change ( ) Addition Name: HIELSCHER, RICHARD B Name: HIELSCHER, RICHARD B Address: 800 FRONTAGE ROAD Address: 800 FRONTAGE ROAD City-St-Zip: NORTHFIELD, IL 60093

Title: VD ( ) Delete Title: SD (X) Change ( ) Addition Name: SOUDAN, ROBERT A Name: MOON EISEL, TRUDY

Address: 800 FRONTAGE ROAD Address: 4760 TAMIAMI TRAIL NORTH #2

City-St-Zip: NORTHFIELD, IL 60093 City-St-Zip: NAPLES, FL 34103

 Title:
 VSD () Delete
 Title:
 D (X) Change () Addition

 Name:
 SOUDAN, ROBERT A JR.
 Name:
 TURNER KIPP, TAMMY

 Address:
 800 FRONTAGE ROAD
 Address:
 3701 TAMIAMI TRAIL NORTH

City-St-Zip: NORTHFIELD, IL 60093 City-St-Zip: NAPLES, FL 34103

Title: ( ) Delete Title: AS ( ) Change (X) Addition

 Name:
 Name:
 GAIL, SANFORD R

 Address:
 Address:
 70 W. MADISON ST

 City-St-Zip:
 City-St-Zip:
 CHICAGO, IL 60602

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: RICHARD B HIELSCHER PSD 04/24/2007