2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N06000012947



FILED
May 09, 2007 8:00 am
Secretary of State
05-09-2007 90105 046 ****61.25

DEL MAR RETAIL CENTER CONDOMINUM ASSOCIATION, INC.							
Principal Place of Business 8775 HIDEAWAY HABOR COURT NAPLES, FL 34120		Mailing Address 8775 HIDEAWAY HABOR COURT NAPLES, FL 34120		gu.vv-			
2. Principal F	Place of Business - No P.O. Box # Aus Bouleured #, etc.	3. Mailing Address O Co ON (6) Suite, Apt. #, etc.	y S	Drc. 04242007 Chg	-NP CR2E037	(12/06)	
City & State Nag (e 5		City & State Naple 5 Fr 34101		4. FEI Number Applied For Not Applicable			
Zip	Country USA	34104	Country	5. Certificate of State	Fe	3.75 Additio e Required	nal
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GOLDMAN, ELLEN A ESQ PORTER WRIGHT MORRIS & ARTHUR LLP 5801 PELICAN ABY BLVD STE 300 NAPLES, FL 34108-2709 TO 48 Goodlette Road # >00 City 100 (e) FL Zip Code 3 4102							2
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 typed of printed pame of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
Filing Fee is \$61.25 Due by May 1, 2007 9. Election Campaign Financing Trust Fund Contribution.				\$5.00 May Be Added to Fees	Make check p Florida Departm		,
10.	OFFICERS AND DIF		11.	ADDITIONS/CHANGES	S TO OFFICERS AND DIRE		
NAME STREET ADDRESS CITY-ST-ZIP	D GLOGAU, KURT 8775 HIDEAWAY HABOR COUR NAPLES, FL 34120	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		L	_] Change [Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GLOGAU, JOANNE 8775 HIDEAWAY HABOR COUR NAPLES, FL 34120	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	C	Change [Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEBER, CHRISTOPHER 8775 HIDEAWAY HABOR COUR NAPLES, FL 34120	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		[Change [Addition
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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 receivery by fuster emplowered 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 empowered. SIGNATURE: SIGNATURE: Date D							