2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2007
Secretary of State

DOCUMENT# N06750

Entity Name: CARRIEDALE GARDENS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

15646 CARRIEDALE LANE
FT. MYERS, FL 33912

New Principal Place of Business:

Current Mailing Address:

15751 SAN CARLOS BLVD #8
FT. MYERS, FL 33908

New Mailing Address:

FEI Number: 59-2702571 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DG SUITOR ASSOCIATES, INC
15751 SAN CARLOS BLVD #8
FORT MYERS, FL 33908 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: P ( ) Delete
Name: SANDERS, TIM
Address: 15636 CARRIEDALE LANE
City-St-Zip: FT. MYERS, FL 33912

Title: T ( ) Delete
Name: DEMING, H. RANDALL
Address: 15628 CARRIEDALE LANE #3
City-St-Zip: FORT MYERS, FL 33912

Title: D ( ) Delete
Name: BRENDEL, ROBERT
Address: 15626 CARRIEDALE LANE #2
City-St-Zip: FT. MYERS, FL 33912

Title: D ( ) Delete
Name: SWANSON, ANNA
Address: 15662 CARRIEDALE LANE #4
City-St-Zip: FT. MYERS, FL 33912

Title: D ( ) Delete
Name: GILBERTI, GRACE
Address: 15672 CARRIEDALE LANE #4
City-St-Zip: FORT MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SANDERS, TIM
Address: 15636 CARRIEDALE LANE#2
City-St-Zip: FT. MYERS, FL 33912

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: D (X) Change ( ) Addition
Name: FLINN, RICHARD
Address: 156284 CARRIEDALE LANE
City-St-Zip: FORT MYERS, FL 33912

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: TIM SANDERS P 04/25/2007

Electronic Signature of Signing Officer or Director — Date