## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000009475

FILED Feb 05, 2009 Secretary of State

Entity Name: MIDDLEBROOKE AT AVE MARIA TOWNHOMES SECTION I NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:** 

New Principal Place of Business: C/O INTEGRATED PROPERTY MGMT, INC

C/O INTERGRATED PROPERTY MGMT. 3435 10TH STREET N., #201

3435 10TH STREET N, #201 NAPLES, FL 34103

NAPLES, FL 34103

New Mailing Address:

C/O INTERGRATED PROPERTY MGMT.

C/O INTEGRATED PROPERTY MGMT, INC

3435 10TH STREET N., #201

**Current Mailing Address:** 

3435 10TH STREET N, #201

NAPLES, FL 34103

NAPLES, FL 34103

Certificate of Status Desired ( )

FEI Number: 26-1134306

FEI Number Applied For ( ) FEI Number Not Applicable ( )

Name and Address of Current Registered Agent:

INTEGRATED PROPERTY MGMT, INC.

Name and Address of New Registered Agent:

3435 10TH STREET N., # 201

3435 10TH STREET N., #201 NAPLES, FL 34103

INTERGRATED PROPERTY MGMT.

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: VIKKI BLANK

02/05/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:** 

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

() Delete

Name:

BROOKS, SCOTT

BROOKS, SCOTT Name:

9240 ESTERO PARK COMMONS BLVD Address: % PULTE HOME 9240 ESTERO PARK COMMONS BLVD Address:

City-St-Zip: ESTERO, FL 32928 City-St-Zip: ESTERO, FL 32928

Title: Title: ( ) Delete () Change () Addition

MCCORMICK, RICHARD Name: Name: Address: 9240 ESTERO PARK COMMONS BLVD Address: City-St-Zip: ESTERO, FL 32928 City-St-Zip:

Title: DST () Delete Title:

() Change () Addition RAY, LAURA Name: Name:

9240 ESTERO PARK COMMONS BLVD Address: Address: City-St-Zip: ESTERO, FL 32928 City-St-Zip:

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: SCOTT BROOKS DP 02/05/2009