2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2009
Secretary of State

DOCUMENT# N08000001290

Entity Name: DANIELS COMMONS LAND CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

8991 DANIELS CENTER DR., STE. 103
FT. MYERS, FL 33912

New Principal Place of Business:

13650 FIDDLESTICKS BLVD.
SUITE 202-389
FT. MYERS, FL 33912

Current Mailing Address:

8991 DANIELS CENTER DR., STE. 103
FT. MYERS, FL 33912

New Mailing Address:

13650 FIDDLESTICKS BLVD.
SUITE 202-389
FT. MYERS, FL 33912

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

Name and Address of Current Registered Agent:

MCCLEARY, MARK D.
8991 DANIELS CENTER DR., STE. 103
FT. MYERS, FL 33912 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: PD ( ) Delete
Name: MCCLEARY, MARK D.
Address: 8991 DANIELS CENTER DR., STE. 103
City-St-Zip: FT. MYERS, FL 33912

Title: DV ( ) Delete
Name: CRIBBETT, GLENN
Address: 8981 DANIELS CENTER DR., STE. 204
City-St-Zip: FT. MYERS, FL 33912

Title: DST ( ) Delete
Name: CONNELL, SCOTT
Address: 8981 DANIELS CENTER DR., STE. 204
City-St-Zip: FT. MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: GLENN CRIBBETT DV 04/17/2009
Electronic Signature of Signing Officer or Director — Date