

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2007 8:00 am
Secretary of State

05-04-2007 90087 043 ****61.25

40100000



DOCUMENT # N13343			
1. Entity Name VIKING CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business C/O GILLIAN PATERSON 131 SW 47TH TERR CAPE CORAL, FL 33914 US		Mailing Address C/O GILLIAN PATERSON 131 SW 47TH TERR CAPE CORAL, FL 33914 US	
2. Principal Place of Business, - No P.O. Box # <i>Rossman Realty Prop. Mgmt</i>		3. Mailing Address <i>Rossman Realty Prop. Mgmt LLC</i>	
Suite, Apt. #, etc. <i>1104 SE 46th Lane #2</i>		Suite, Apt. #, etc. <i>1104 SE 46th Lane #2</i>	
City & State <i>Cape Coral FL</i>		City & State <i>Cape Coral FL</i>	
Zip <i>33904</i>		Zip <i>33904</i>	
Country		Country	
4. FEI Number 65-0035660		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent C/O ROSSMAN REALTY PROPERTY MGMT 415 CAPE CORAL PKWY W #3 CAPE CORAL, FL 33914		7. Name and Address of New Registered Agent Name <i>Michelle Rossman CAM</i> Street Address (P.O. Box Number is Not Acceptable) <i>Rossman Realty Property Mgmt. LLC</i> <i>1104 SE 46th Lane #2</i> City <i>Cape Coral</i> FL Zip Code <i>33904</i>	
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 <i>Michelle Rossman</i>		DATE <i>4/27/07</i>	
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)	
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE P	<input type="checkbox"/> Delete	TITLE PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME LE BLANC, TAMI		NAME	
STREET ADDRESS 131 SW 47 TER # 206		STREET ADDRESS	
CITY-ST-ZIP CAPE CORAL, FL 33914		CITY-ST-ZIP	
TITLE VP	<input type="checkbox"/> Delete	TITLE VPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME LAMBERGER, CAROL		NAME Umberger, Carol	
STREET ADDRESS 6000 OAKHILL AVE NE		STREET ADDRESS	
CITY-ST-ZIP AILAONCE, OH 94601		CITY-ST-ZIP	
TITLE S/T	<input type="checkbox"/> Delete	TITLE STD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME PATERSON, GILLIAN		NAME	
STREET ADDRESS 131 SW 47TH TERRACE		STREET ADDRESS	
CITY-ST-ZIP CAPE CORAL, FL 33914		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
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 receiver or trustee empowered 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: <i>Tami LeBlanc by Michelle Rossman</i>		DATE: <i>4/27/07</i>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR <i>Tami LeBlanc</i>		Daytime Phone # <i>239-443-1091</i>	