
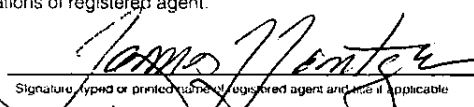


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

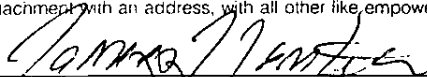
**FILED**  
**Mar 03, 2006 8:00 am**  
**Secretary of State**

03-03-2006 90121 035 \*\*\*\*61.25

<b>DOCUMENT # N13387</b> 1. Entity Name <b>NAPLES BAY CLUB STORAGE ASSOCIATION, INC.</b>					
Principal Place of Business <b>475 NORTH ROAD NAPLES FL 33942</b>			Mailing Address <b>475 NORTH ROAD NAPLES FL 33942</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>JENTGEN, JAMES J</b> <b>1925 E. GORDON DRIVE</b> <b>NAPLES FL 34102</b>				Name <b>JENTGEN, JAMES J.</b> Street Address (P.O. Box Number is Not Acceptable) <b>1778 YORK ISLAND DR</b> City <b>NAPLES</b> FL <b>34112</b>	
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  <small>Signature, typed or printed name of registered agent and title if applicable</small>		<small>(NOTE: Registered Agent signature required when re-stating)</small>		DATE <b>2/28/06</b>	
<b>FILE NOW: FEE IS \$61.25</b> <b>Due By May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
<b>Make Check Payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE	<b>PD JENTGEN, JAMES J</b> <input type="checkbox"/> Delete		TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>1925 E. GORDON DRIVE</b>		NAME	<b>1778 YORK ISLAND DR</b>	
STREET ADDRESS	<b>NAPLES FL 33940</b>		STREET ADDRESS	<b>NAPLES FL 34112</b>	
CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete		CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE	<b>SD VEGA, YADIRA P</b> <input checked="" type="checkbox"/> Delete		TITLE	<b>JOHN G ROSOLIA</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	<b>6852 COMPTON LANE SOUTH</b>		NAME	<b>475 NORTH RD</b>	
STREET ADDRESS	<b>NAPLES FL 33942</b>		STREET ADDRESS	<b>NAPLES, FL 34104-3409</b>	
CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete		CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	<b>D SUTTER, STEVE</b> <input checked="" type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>3084 52 ST SW</b>		NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	<b>NAPLES FL 34116</b>		STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
CITY-ST-ZIP	<input type="checkbox"/> Delete		CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<input type="checkbox"/> Delete		NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	<input type="checkbox"/> Delete		STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
CITY-ST-ZIP	<input type="checkbox"/> Delete		CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:



**2/28/06 (239) 643-3666**