2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 20, 2006 8:00 am Secretary of State

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ANNUAL REPORT DOCUMENT # N18659

1. Entity Name THE COURTVIEW BUILDING ASSOCIATION, INC. Principal Place of Business Mailing Address 2660 AIRPORT ROAD SOUTH 2660 AIRPORT ROAD SOUTH NAPLES, FL 34112 NAPLES, FL 34112 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04102006 Chg-NP CR2E037 (11/05) Applied For City & State City & State 4. FEI Number 65-0172314 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BROWN, THOMAS R 2660 AIRPORT ROAD SOUTH Street Address (P.O. Box Number is Not Acceptable) NAPLES, FL 34112 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Due by May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. PD TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME VEGA, GEORGE JR. NAME STREET ADDRESS 2660 AIRPORT ROAD SOUTH STREET ADDRESS CITY-ST-ZIP NAPLES, FL CITY-ST-ZIP VSD ☐ Change ☐ Addition TITLE Delete TITLE BROWN, THOMAS R. NAME NAME STREET ADDRESS 2660 AIRPORT ROAD SOUTH STREET ADDRESS CITY-ST-ZIP NAPLES, FL CITY+ST-ZIP STD TITLE ☐ Change ☐ Addition TITLE ☐ Delete STANLEY, JOHN F. NAME NAME 2660 AIRPORT ROAD SOUTH STREET ADDRESS STREET ADDRESS NAPLES, FL CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete 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. George Vega Jr SIGNATURE: Daytime Phone #