

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20888

FILED
Apr 10, 2007
Secretary of State

Entity Name: THE ABBEY MANAGEMENT ASSOCIATION, INC.

Current Principal Place of Business:

4600 ENTERPRISE AVE
NAPLES, FL 34104 US

New Principal Place of Business:

500 LOGAN BLVD SOUTH
NAPLES, FL 34119 US

Current Mailing Address:

4600 ENTERPRISE AVE
NAPLES, FL 34104 US

New Mailing Address:

500 LOGAN BLVD SOUTH
NAPLES, FL 34119 US

FEI Number: 65-0029306

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAYVIEW PROPERTY MANAGEMENT CORP.
4600 ENTERPRISE AVE
NAPLES, FL 34104 US

Name and Address of New Registered Agent:

BAYVIEW PROPERTY MANAGEMENT CORP.
500 LOGAN BLVD SOUTH
NAPLES, FL 34119 US

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:

04/10/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: RYAN, DONALD
Address: 1208 COMMON WEALTH CIR. #J-206
City-St-Zip: NAPLES, FL 34116

Title: T () Delete
Name: FITZGERALD, JOHN
Address: 1224 COMMONWEALTH CR #N-201
City-St-Zip: NAPLES, FL 34116

Title: PD () Delete
Name: FISHER, BILL
Address: 1208 COMMON WEALTH CIR. #J-106
City-St-Zip: NAPLES, FL 34116

Title: D () Delete
Name: FITZGERALD, JOHN
Address: 1215 COMMONWEALTH CR #N-201
City-St-Zip: NAPLES, FL 34116

Title: S () Delete
Name: PEPPE, FERRA
Address: 1200 COMMON WEALTH CIR #H-102
City-St-Zip: NAPLES, FL 34116

Title: D () Delete
Name: WILLIAMS, EDWARD
Address: 1200 COMMON WEALTH CIR #H-203
City-St-Zip: NAPLES, FL 34116

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:

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 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: EDWARD WILLIAMS

D

04/10/2007

Electronic Signature of Signing Officer or Director

Date