

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N26139

**FILED**  
**Jan 30, 2011**  
**Secretary of State**

**Entity Name:** KASOTA QUARTERS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

371 11TH AVE. S  
NAPLES, FL 34102 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O SUSAN BECKER  
371 11TH AVE. S.  
NAPLES, FL 34102 US

**New Mailing Address:**

371 11TH AVE. S  
NAPLES, FL 34102 US

**FEI Number:** 65-0098946

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BURKE, JR, CHARLES A  
373 11TH AVE S  
NAPLES, FL 34102 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: VD  
Name: SNYDER, MARY JANE  
Address: 353-11 TH AVE S  
City-St-Zip: NAPLES, FL 34102

Title: PD  
Name: BURKE, JR, CHARLES A  
Address: 373 11TH AVE S  
City-St-Zip: NAPLES, FL 34102

Title: VD  
Name: BECKER, SUSAN  
Address: 371 11TH AVE S  
City-St-Zip: NAPLES, FL 34102

Title: VD  
Name: PAULSON, JR, L. EDWIN  
Address: 351 11 AVE S  
City-St-Zip: NAPLES, FL 34102

I hereby 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 all other like empowered.

SIGNATURE: CHARLES A. BURKE JR.

PRES

01/30/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date