

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 12, 2007 8:00 am**  
**Secretary of State**

02-12-2007 90107 009 \*\*\*\*61.25

**DOCUMENT # N27214**

1. Entity Name

COLONY PLACE ASSOCIATION, INC.



Principal Place of Business

Mailing Address

1407 COLONY PLACE  
VENICE FL 34292-1522  
US

1407 COLONY PLACE  
VENICE FL 34292-1522  
US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2895714

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ARGUS MGMT. OF VENICE, INC  
~~153 CENTER RD~~  
VENICE FL 34285-5572

Name

Street Address (P.O. Box Number is Not Acceptable)

181 CENTER RD.

City

FL

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 resigning)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$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	PD	<input type="checkbox"/> Delete
NAME	NETOLS, PATRICK	
STREET ADDRESS	1400 COLONY PL.	
CITY- ST- ZIP	VENICE FL 34292	
TITLE	VD	<input type="checkbox"/> Delete
NAME	DEANHARDT, JACK	
STREET ADDRESS	1435 COLONY PL.	
CITY- ST- ZIP	VENICE FL 34292	
TITLE	TD	<input type="checkbox"/> Delete
NAME	HOPKINS, LEROY	
STREET ADDRESS	1402 COLONY PL.	
CITY- ST- ZIP	VENICE FL 34792	
TITLE	SD	<input type="checkbox"/> Delete
NAME	WILLIAMS, RALPH	
STREET ADDRESS	1418 COLONY PL.	
CITY- ST- ZIP	VENICE FL 34292	
TITLE	D	<input type="checkbox"/> Delete
NAME	BURKE, EDMUND	
STREET ADDRESS	1408 COLOY PLACE	
CITY- ST- ZIP	VENICE FL 34292	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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:

*Patrick F. Netols* PATRICK F. NETOLS 2/25/07 941-484-8879  
PRES.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Company Phone #