2006 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # N28310 BRADSTROM VILLAGE CONDOMINIUM ASSOCIATION,



FILED
May 01, 2006 8:00 am
Secretary of State
05-01-2006 90459 023 ****61.25

INC.										
C/O RESORT MANAGEMENT C 2685 HORSESHOE DR. S.#215 2		C/O R 2685	Mailing Address C/O RESORT MANAGEMENT 2685 HORSESHOE DR. S.#215 NAPLES, FL 34104 US							
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.				04132006 C	hg-NP	CR2E037 (11/05)		
City & State		City & State				4. FEI Number 59-16957	70	⊢	opplied For lot Applicable	
Zíp	Country	Zip		Country	5. Certificate		tatus Desired	□ \$8.75 Ac Fee Requir		
	6. Name and Address of Current		7. Name and Address of New Registered Agent							
GREUSEL, JAIME					Name					
1104 N. COLLIER BLVD. MARCO ISLAND, FL 34145				Street A	Street Address (P.O. Box Number is Not Acceptable)					
					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 reinstating) DATE										
Filing Fee is \$61.25 Due by May 1, 2006 9. Election Campaig Trust Fund Contril						\$5.00 May Be Added to Fees		ake check payable ida Department of S		
10.	OFFICERS AND DIF	RECTORS		11.		DDITIONS/CHANG	L SES TO OFFICER	RS AND DIRECTORS I	N 10	
TITLE	PD		Delete	TITLE				☐ Change	☐ Addition	
NAME	AE DANIEL, FLOREANI			NAME						
STREET ADDRESS 332 BRADSTROM CIRCLE, D-204)4		STREET ADDRESS						
CITY-ST-ZIP	NAPLES, FL 34113			CITY-ST-ZIP						
TITLE	VPD		☐ Delete	TITLE	Direc	ctor		Change	Addition	
NAME STREET ADDRESS	NORCROSS, ALVIN 334 BRADSTROM CIRCLE,C-202			NAME STREET ADDRESS						
CITY-ST-ZIP	NAPLES, FL 34113			CITY-ST-ZIP						
TITLE	TD		Delete	TITLE	Secre	tary Treasu	res	☐ Change	Addition	
NAME	MCDONALD, NORMA		TAT Delete	NAME	More	lan, George N.E. 28th	•	[_] Shange	Addition	
STREET ADDRESS	332 BRADSTROM CIRCLE, D-10)4		STREET ADDRESS						
CITY-ST-ZIP	NAPLES, FL 34113			CITY-ST-ZIP	Pom	ipano Bch,	FL 3304	, J-		
TITLE	D		☑ Delete	TITLE		•		☐ Change	Addition	
NAME	WRIGHT, BRAD			NAME						
STREET ADDRESS CITY-ST-ZIP	338 BRADSTROM CIR, A-102			STREET ADDRESS CITY-ST-ZIP						
	NAPLES, FL 34113			-	Dage	ident				
TITLE	D COUTURE, DAVID		☐ Delete	TITLE NAME	Fres	Ideiti		☑ Change	Addition	
STREET ADDRESS 328 BRADSTROM CIRCLE #E203		3		STREET ADDRESS	1					
CITY-ST-ZIP	NAPLES, FL 34113			CITY-ST-ZIP					,	
TITLE			☐ Delete	TITLE	Vice	President		☐ Change	Addition	
NAME				NAME	Alm	Helen				
STREET ADDRESS				STREET ADDRESS	5912	Helen willowbrod	KDr.			
CITY-ST-ZIP CITY-					Sag	inaw, mt +	18603			
12. Thereby of	certify that the information supplied with	this filing	does not qualify for	the exemptions of	contained	in Chapter 119, Flo	rida Statutes, Li	further certify that the	information	

Indicated on this report or supplied with his liting does not qualify for the exemptions contained in Chapter 119, Florida Statutes. Flurtner certify that the information indicated on this report or suppliemental 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 AND TYPED OR PRINTED NAME OF SIGNING DEFICER OR DIRECTOR

)David Couture