

# 2005 ANNUAL REPORT (AR)

## DOCUMENT # N36426

1. Entity Name

NORTHERN LIGHT'S CONDOMINIUM ASSOCIATION, INC.



APPROVED  
AND  
FILED

05 MAY 10 PM 6:38

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



MOORE CR2E037 (11/03) *MRS*

Principal Place of Business  
CENTURY 21 ALMAR & ASSOC  
1190 W MARION AVE SUITE 115  
PUNTA GORDA FL 33950

Mailing Address  
RICHARD BAPTISTA  
12 DONNE RD.  
GLOUCESTER MA 01930  
US

2. Principal Place of Business

3. Mailing Address  
*Richard BAPTISTA*  
Suite, Apt. #, etc.  
*30-A-CHERRY ST.*

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State  
*GLOUCESTER, MA*

4. FEI Number

58-1879853

Applied For

Not Applicable

Zip

Country

Zip

01930

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

HUGHES, ALEX JR  
1190 W MARIAN AVE  
SUITE 115  
PUNTA GORDA FL 33950

7. Name and Address of New Registered Agent

Name

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

FILE NOW: FEE IS \$61.25  
Due By May 1, 2004

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

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
STD  
BAPTISTA, RICHARD A  
12 DONNE RD.  
GLOUCESTER MA 01930 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
VD  
SPURR, SHERM  
P O BOX 7446  
CAPE PORPOISE ME 04014 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
PD  
LAFATA, GASPAR  
6A BIRCH GROVE HIGHTS  
GLOUCESTER MA 01930 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
STD  
RICHARD BAPTISTA  
30 A CHERRY ST  
GLOUCESTER MA 01930 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
VD  
JOSEPH ORLANDO  
1 WESTERN AVE  
GLOUCESTER MA 01930 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
400055206694  
05/24/05--01071--016 \*\*\$1.25 ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

*Richard A Baptista* Richard A Baptista 4/17/04 978-283-1223  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #