2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36512

FILED Apr 17, 2008 Secretary of State

Entity Name: THE COLONADE AT PARK SHORE OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: C/O R&P PROPERTY MANAGEMENT 265 AIRPORT ROAD SOUTH NAPLES FL 34104 **New Mailing Address: Current Mailing Address:** C/O R & P PROPERTY MANAGEMENT 265 AIRPORT ROAD SOUTH NAPLES, FL 34104 FEI Number: 65-0227228 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: R & P MANAGEMENT ASSOC 265 AIRPORT RD SOUTH NAPLES, FL 34104 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition HANSCOMB, CHARLES Name: Name: 203 COLONADE CIRCLE Address: Address: City-St-Zip: NAPLES, FL 34103 City-St-Zip: Title: () Delete Title: () Change () Addition PHANEUF, ROGER Name: Name: Address: 227 COLONADE CIRCLE Address: City-St-Zip: NAPLES, FL 34103 City-St-Zip: Title: () Delete Title: () Change () Addition CARTHAUS, RICHARD Name: Name: 6213 PARKWOOD RD Address: Address: City-St-Zip: EDINA, MN 55436 City-St-Zip: Title: SD () Delete Title: (X) Change () Addition Name: KOSOWSKI, KENNETH Name: MONROE, EDWIN 213 COLONADE CIRCLE 259 COLONADE CIRCLE Address: Address: City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 34103 Title: () Delete Title: (X) Change () Addition SMITH, PHIL SMITH, RHETT Name: Name: 127 COLONADE CIRCLE 155 COLONADE CIRCLE Address: Address: City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 34103 Title: () Delete Title: (X) Change () Addition GHORAYAB, FAY GHORAYAB, FAY Name: Name: Address: 216 COLONADE CIRCLE Address: 216 COLONADE CIRCLE NAPLES, FL 34103 NAPLES, FL 34103 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: CHARLES HANSCOMB PD 04/17/2008