2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40507

FILED Apr 16, 2007 Secretary of State

Entity Name: GREATER IMPERIAL BOARD, INC.

Current Principal Place of Business:

New Principal Place of Business:

901 IMPERIAL GOLF COURSE BLVD. NAPLES, FL 34110 US

Current Mailing Address: New Mailing Address:

PO BOX 11209 COLLIER FINANCIAL, INC.
NAPLES, FL 34101 US 4985 TAMIAMI TRAIL E.
NAPLES, FL 34113 US

FEI Number: 65-0218444 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:

BOUCHER, ROGER 10823 108TH AVENUE NORTH #H NAPLES, FL 34108 US

OFFICERS AND DIRECTORS:

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

Electronic Signature of Registered A

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD () Delete Title: PD (X) Change () Addition Name: GAGNIER, JOE Name: GAGNIER, JOE

 Name
 GAGNIER, 30E
 Name
 GAGNIER, 30E

 Address:
 1213 IMPERIAL DR.
 Address:
 1213 IMPERIAL DR.

 City-St-Zip:
 NAPLES, FL 34110
 City-St-Zip:
 NAPLES, FL 34110

Title: SD () Delete Title: TD (X) Change () Addition Name: VONIER, WILLIAM Name: MORANI, REN

Address: 2065 IMPERIAL DRIVE Address: 13100 HAMILTON HARBOR DR, APT G1

City-St-Zip: NAPLES, FL 34110 City-St-Zip: NAPLES, FL 34110

Title: PD () Delete Title: VD (X) Change () Addition Name: FICK, RAY Name: FICK, RAY

Address: 1926 IMPERIAL GOLF COURSE BLVD Address: 1926 IMPERIAL GOLF COURSE BLVD

City-St-Zip: NAPLES, FL 34110 City-St-Zip: NAPLES, FL 34110

Title: () Delete Title: SD () Change (X) Addition

Name: Name: SLATTERY, JIM
Address: Address: 1210 YESICA ANN CIR, #202

City-St-Zip: City-St-Zip: NAPLES, FL 34110

I hereby certify that the information supplied with this filing does not qualify for the 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: JOE GAGNIER PD 04/16/2007