

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41452

FILED
Apr 13, 2007
Secretary of State

Entity Name: BAREFOOT BEACH CLUB III CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

259 BAREFOOT BEACH BLVD
BONITA SPRINGS, FL 34134 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 11209
NAPLES, FL 34101 US

New Mailing Address:

FEI Number: 59-3050990

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARLER, GREGORY W ESQ.
BANK OF AMERICA CENTER
4501 TAMiami TRAIL NORTH, SUITE 214
NAPLES, FL 341030000 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: KNIFF, STEWART
Address: 265 BAREFOOT BEACH BLVD., PH4
City-St-Zip: BONITA SPRINGS, F 34134

Title: PD () Delete
Name: TURNER, BILL
Address: 265 BAREFOOT BCH BLVD #502
City-St-Zip: BONITA SPRINGS, FL 34134

Title: D () Delete
Name: HORN, LOU
Address: 267 BAREFOOT BEACH BLVD
City-St-Zip: BONITA SPRINGS, FL 34134

Title: D () Delete
Name: KNIFF, STEWART
Address: 265 BAREFOOT BCH BLVD PH4
City-St-Zip: BONITA SPRINGS, FL 34134

Title: STD () Delete
Name: EDELBROCK, BECKY
Address: 265 BAREFOOT BEACH BLVD., #404
City-St-Zip: BONITA SPRINGS, FL 34134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: LANCIA, FLOYD
Address: 5315 TUNBRIDGE CROSSING
City-St-Zip: FORT WAYNE, IN 46815

Title: D (X) Change () Addition
Name: TAYLOR, RICHARD
Address: 626 JENNINGS LANE
City-St-Zip: BATTLE CREEK, MI 49015

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BILL TURNER

PD

04/13/2007

Electronic Signature of Signing Officer or Director

Date