

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43709

FILED
Apr 23, 2007
Secretary of State

Entity Name: 100 LA PENINSULA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 1266
MARCO ISLAND, FL 34146 US

New Principal Place of Business:

C/O R & P PROPERTY MANAGEMENT
265 AIRPORT RD S
NAPLES, FL 34104 US

Current Mailing Address:

P.O. BOX 1266
MARCO ISLAND, FL 34146 US

New Mailing Address:

C/O R & P PROPERTY MANAGEMENT
265 AIRPORT RD S
NAPLES, FL 34104 US

FEI Number: 65-0270173

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPANNAKER CAG MGMT CO
P.O. BOX 1266
601 ELKAM CIR, UNIT B-7
MARCO ISLAND, FL 34146 US

Name and Address of New Registered Agent:

R & P PROPERTY MANAGEMENT
265 AIRPORT RD S
NAPLES, FL 34104 US

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: GLENN CARROLL

04/23/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: ROBINSON, JERRY
Address: 109 LA PENINSULA BLVD
City-St-Zip: NAPLES, FL 34113

Title: PD () Delete
Name: JENNINGS, CHUCK
Address: 105 LA PENINSULA BLVD
City-St-Zip: NAPLES, FL 34113

Title: STD () Delete
Name: DOBBERTEN, INACE
Address: 144 LA PENINSULA BOULEVARD
City-St-Zip: NAPLES, FL 34113

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ROBINSON, JERRY
Address: 109 LA PENINSULA BLVD
City-St-Zip: NAPLES, FL 34113

Title: STD (X) Change () Addition
Name: DOBBERTEN, INACE
Address: 144 LA PENINSULA BLVD
City-St-Zip: NAPLES, FL 34113

Title: D (X) Change () Addition
Name: PARRISH, STANFORD
Address: 12027 SYCAMORE LAKES CT
City-St-Zip: FT WAYNE, IN 46814

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: GLENN CARROLL

PRES

04/23/2007

Electronic Signature of Signing Officer or Director

Date