


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90831 038 ****61.25

DOCUMENT # N46377 1. Entity Name SANTA MARIA DOCK COOPERATIVE, INC.					
Principal Place of Business 6640 ESTERO BLVD. FT. MYERS BEACH, FL 33931			Mailing Address 6640 ESTERO BLVD. FT. MYERS BEACH, FL 33931		
2. Principal <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Suite, Apt Alliant Property Management, LLC 6719 Winkler Road, Suite 200 </div> <div style="width: 45%;"> c. Fort Myers, FL 33919 </div> </div>					
City & Sta Fort Myers, FL 33919			4. FEI Number 65-0307768		
Zip 33919			5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
Country USA			Country USA		
6. Name and Address of Current Registered Agent MONSUD, MARY ANNE 6640 ESTERO BLVD. FT. MYERS BEACH, FL 33931			7. Name and Address of New Registered Agent <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Name Alliant Property Management, LLC Street Ad 6719 Winkler Road, Suite 200 City Fort Myers, FL 33919 </div> <div style="width: 45%;"> Code 33919 </div> </div>		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, with, and accept the obligations of registered agent.					
SIGNATURE <i>Millie Strohm</i> <small>Signature, typed or printed name of registered agent and title if applicable.</small>		<i>Millie Strohm Agent</i> <small>(NOTE: Registered Agent signature required when reinstating)</small>		DATE 4-19-07	
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	POVP LOWERY, AL 3256 PIKEWOOD COURT COMMERCE TOWNSHIP, MI 48382	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VDP Berry Fitzgerald 24025 Indian Ridge Court Agoura Hills, CA 91301	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD DOWLING, THOMAS W 7317 ESTERO BLVD #300 FORT MYERS BEACH, FL 33931	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VDP BIDGOOD, DOUGLAS 6951 YORK STREET FARMINGTON, MI 48331	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD DOWLING, THOMAS W 7317 ESTERO BLVD #300 FORT MYERS BEACH, FL 33931	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>[Signature]</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date 239-454-1101 <small>Daytime Phone #</small>		

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