

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2006 8:00 am
Secretary of State

04-25-2006 90115 009 ****61.25

DOCUMENT # N49487 1. Entity Name LE CIEL VENETIAN TOWER ASSOCIATION, INC.					
Principal Place of Business 3971 GULF SHORE BLVD. NORTH NAPLES, FL 34103 US			Mailing Address C/O FINANCIAL MANAGEMENT SERVICES P.O. BOX 11496 NAPLES, FL 34101-1496		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address 3971 Gulf Shore Blvd. N Suite, Apt. #, etc.		
City & State Naples FL			4. FEI Number 65-0341384		
Zip 34103			Country USA		
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required			Applied For ☐ Not Applicable		
6. Name and Address of Current Registered Agent LE CIEL VENETIAN TOWER FALK, STEVEN 850 PARK SHORE DRIVE TRIANON CENTRE, THIRD FLOOR NAPLES, FL 34103 Date 4-20-06 Amount 61.25 Act. # 474 Mgr. RMP					
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code					
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Steven Falk</i></u> DATE <u>4/13/06</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS					
TITLE	P	☐ Delete	TITLE	Nelson	☒ Change ☐ Addition
NAME	NEELSON, CHARLES R.		NAME		
STREET ADDRESS	3971 GULF SHORE BLVD. # 805		STREET ADDRESS		
CITY-ST-ZIP	NAPLES, FL 34103		CITY-ST-ZIP		
TITLE	S	☐ Delete	TITLE	Treasurer	☐ Change ☒ Addition
NAME	JENSEN, MARY		NAME	Sachs, Ned	
STREET ADDRESS	3971 GULF SHORE BLVD #901		STREET ADDRESS	3971 Gulf Shore Blvd. N. #PH302	
CITY-ST-ZIP	NAPLES, FL 34103		CITY-ST-ZIP	Naples, FL 34103	
TITLE	V	☐ Delete	TITLE	Director	☐ Change ☒ Addition
NAME	RAYMOND, ROBERT		NAME	Hughes, Robert	
STREET ADDRESS	2971 GULF SHORES BLVD.		STREET ADDRESS	3971 Gulf Shore Blvd. N. #304	
CITY-ST-ZIP	NAPLES, FL 34103		CITY-ST-ZIP	Naples, FL 34103	
TITLE	T	☒ Delete	TITLE	Director	☐ Change ☒ Addition
NAME	GOGUEN, PAUL		NAME	Miller, Gerald	
STREET ADDRESS	3971 GULF SHORE BLVD #1501		STREET ADDRESS	3971 Gulf Shore Blvd. N. #1605	
CITY-ST-ZIP	NAPLES, FL 34103		CITY-ST-ZIP	Naples, FL 34103	
TITLE	D	☒ Delete	TITLE		☐ Change ☐ Addition
NAME	SKVAZA, HELEN		NAME		
STREET ADDRESS	3971 GULF SHORE BLVD #1504		STREET ADDRESS		
CITY-ST-ZIP	NAPLES, FL 34103		CITY-ST-ZIP		
TITLE	D	☒ Delete	TITLE		☐ Change ☐ Addition
NAME	MORANTZ, ROBERT		NAME		
STREET ADDRESS	3971 GULF SHORE BLVD. #1802		STREET ADDRESS		
CITY-ST-ZIP	NAPLES, FL 34103		CITY-ST-ZIP		
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: <u><i>Charles R. Nelson</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date <u>4-11-06</u> Daytime Phone # <u>239-281-1157</u>		