

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49491

FILED
Mar 09, 2006
Secretary of State

Entity Name: COLONIAL CROSSINGS RETENTION AREA MAINTENANCE ASSOCIATION, INC.

Current Principal Place of Business:

C/O EZON INC
1100 FIFTH AVE SOUTH, STE 401
NAPLES, FL 34102 US

New Principal Place of Business:

1100 FIFTH AVENUE SOUTH
SUITE 210
NAPLES, FL 34102 US

Current Mailing Address:

1100 FIFTH AVENUE SOUTH
STE. 401
NAPLES, FL 34102 US

New Mailing Address:

1100 FIFTH AVENUE SOUTH
STE. 210
NAPLES, FL 34102 US

FEI Number: 62-0933375

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ITTNER, GARY E
1100 FIFTH AVENUE SOUTH
SUITE 210
NAPLES, FL 34102 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: TACKETT, JACK O
Address: 1100 5TH AVE SOUTH, STE 401
City-St-Zip: NAPLES, FL 34102 US

Title: D () Delete
Name: HALVORSEN, JEFFREY T
Address: 33 SE 4TH STREET, STE 100
City-St-Zip: BOCA RATON, FL 33432

Title: D () Delete
Name: VINCENT, TOM
Address: 33 S E 4TH ST, STE 100
City-St-Zip: BOCA RATON, FL 34102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: TACKETT, JACK O
Address: 1100 5TH AVE SOUTH, STE 210
City-St-Zip: NAPLES, FL 34102 US

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

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: JACK O TACKETT

D

03/09/2006

Electronic Signature of Signing Officer or Director

Date