2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001391

FILED Mar 28, 2007 Secretary of State

Entity Name: CAPTAIN'S BAY NORTH CONDOMINIUM ONE ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:		
2180 W S SUITE 500 LONGWC		US			
Current N	lailing Address	s:	New Mailing Addres	s:	
2180 W S SUITE 500 LONGWC		US			
FEI Number	: 65-0422743	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
HART, JA 2180 W S	MES W JR				
SUITE 500 LONGWC		US			
LONGWC	00 OOD, FL 32779		ourpose of changing its registere	d office or registered agent, or both,	
LONGWC	00 OOD, FL 32779 e named entity si e of Florida.		ourpose of changing its registere	d office or registered agent, or both,	
LONGWC The above in the Stat	00 OD, FL 32779 e named entity si e of Florida. RE:			d office or registered agent, or both, Date	
LONGWC The above in the Stat SIGNATU	00 OD, FL 32779 e named entity si e of Florida. RE:	ubmits this statement for the p	ent		
LONGWC The above in the Stat SIGNATU OFFICER Title: Name: Address:	DOD, FL 32779 e named entity sie of Florida. RE: Electroni S AND DIRECT	ubmits this statement for the procession of Registered Agronal Company of Registered Agronal Com	ent	Date	
LONGWC The above in the Stat SIGNATU	DOD, FL 32779 E named entity sie of Florida. RE: Electroni S AND DIRECT PD ()I BURFORD, BRU 8416 OLD WOR UNION, KY 4109	ubmits this statement for the process consistence of Registered Agronal Construction o	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS	

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: BRUCE BURFORD PD 03/28/2007