

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005675

FILED
Apr 28, 2005
Secretary of State

Entity Name: SIR THOMAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

740 TAMIAMI TRAIL
PT CHARLOTTE, FL 33948

New Principal Place of Business:

Current Mailing Address:

19800 VETERANS BLVD.
SUITE 1
PT CHARLOTTE, FL 33954

New Mailing Address:

FEI Number: 59-2076655

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

D'APRILE, THOMAS C
19800 VETERANS BLVD
STE 1
PORT CHARLOTTE, FL 33954 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: PD () Delete
Name: D'APRILE, THOMAS C
Address: 19800 VETERANS BLVD STE 1
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: DV () Delete
Name: D'APRILE, THOMAS JR
Address: 19800 VETERANS BLVD STE 1
City-St-Zip: PORT CHARLOTTE, FL 33954

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 Section 119.07(3)(i), 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: THOMAS C. D'APRILE

PD

04/28/2005

Electronic Signature of Signing Officer or Director

Date