

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003961

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Entity Name:** DESIGN ASSOCIATES OF TRADE CENTER WAY, CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1989 TRADE CENTER WAY  
NAPLES, FL 34109

**New Principal Place of Business:**

**Current Mailing Address:**

1989 TRADE CENTER WAY  
NAPLES, FL 34109

**New Mailing Address:**

5307 SHIRLEY ST  
UNIT I  
NAPLES, FL 34109

FEI Number: 59-3489206

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CALYORE, MICHAEL  
1989 TRADE CENTER WAY  
NAPLES, FL 34109 US

**Name and Address of New Registered Agent:**

CALYORE, MICHAEL  
5307SHIRLEY ST  
UNIT I  
NAPLES, FL 34109 US

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: MICHAEL CALYORE

04/19/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: CALYORE, MICHAEL  
Address: 5307 SHIRLEY ST UNIT I  
City-St-Zip: NAPLES, FL 34109

Title: D  
Name: CALYORE, CHRISTINE J  
Address: 6489 AUTUMN WOODS BLVD  
City-St-Zip: NAPLES, FL 34109

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL CALYORE

PD

04/19/2011

Electronic Signature of Signing Officer or Director

Date