2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT** DOCUMENT # N97000003523 THE PARTY OF

FILED Apr 06, 2007 8:00 am Secretary of State 04-06-2007 90028 039 ****61.25

Entity Name SPELLBINDER VILLAS I CONDOMINUM ASSOCIATION, INC.							41	109100/	J			
BUSINESS SOLUTIONS OF NAPLES BUS 800 SEAGATE DRIVE #202 800			ing Address Siness Solutions of Naples O Seagate Drive #202 Ples, FL 34103							17 11 I l 1 16 1		
2. Principal Place of Business - No P.O. Box # 3. Mai				Mailing Address								
Suite, Apt. #, etc.			Sui	Suite, Apt. #, etc.			03152007	Chg-NP	CR2E037	(12/06)		
City & State			City	City & State			4. FEI Number 59-35798	306			plied For Applicable	
Zip	Country		Zip		Country		5. Certificate of	Status Desired		8.75 Add ee Require		
6. Name and Address of Current Registered				d Agent			7. Name and Ad	dress of New R	legistered Aç	gent		
					Name						1	
R & A AGENTS, INC ROETZOL & ANDREWS, LPA 850 PARK SHORE DRIVE THIRD FL					Street A	Street Address (P.O. Box Number is Not Acceptable)						
NAPLES, FL 34103											i	
					City		FL Zip Code					
	named entity ons of registe	e submits this statement for ered agent.	or the purpo	ese of changing its i	egistered office o	r registere	ed agent, or both,	in the State of Flo	orida. I am fa	miliar with,	and accept	
SIGNATURE _	Signature, typed	or printed name of registered agent	and title if appli	cable (NOTE	Registered Agent signat	ure required	when reinstating)		DATE			
• • • • • • • • • • • • • • • • • • • •					paign Financing ontribution.		\$5.00 May Be Added to Fees Make check payable to Florida Department of State					
10.		OFFICERS AND DI	RECTORS		11.	A	DDITIONS/CHAN	GES TO OFFICE	RS AND DIRE	CTORS IN	10	
NAME STREET ADDRESS CITY-ST-ZIP	ST TYTWILEC 1060 5TH NAPLES, I	STS		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Ula	FTREA. e. wd4 HA 55 Street	org stor		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HAUG, OLAF 1080 5TH ST S NAPLES, FL 34102			☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	 y				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	4112 HAN	WILLILAM D OVER AVE ID, VA 23221		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	_				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP	adify that the	information supplied with	this filing (☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ontained	in Chapter 110 El	orida Statutan I		Change	Addition formation	

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 officer or 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: _