

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003609

FILED
Apr 17, 2009
Secretary of State

Entity Name: NORTHBROOKE PLAZA COMMERCIAL ASSOCIATION, INC.

Current Principal Place of Business:

2630 NORTHBROOK PLAZA
NAPLES, FL 34119

New Principal Place of Business:

Current Mailing Address:

PO BOX 10608
NAPLES, FL 34102

New Mailing Address:

C/O COLONIAL SQUARE REALTY, INC.
P.O. BOX 10608
NAPLES, FL 34101

FEI Number: 59-3518759

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLONIAL SQUARE REALTY INC
1048 GOODLETTE RD SUITE 201
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: PO () Delete
Name: ANKNEY, PRESIDENT
Address: 12810 TAMiami TrL. N
City-St-Zip: NAPLES, FL 34110

Title: STD () Delete
Name: CRESPO, PAM
Address: 2535 NORTH BROOKE PLAZA DR # B
City-St-Zip: NAPLES, FL 34119

Title: VPD () Delete
Name: BATCHELOR, RICH
Address: 2550 NORTHBROOKE PLAZA DR # 100
City-St-Zip: NAPLES, FL 34119

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PO (X) Change () Addition
Name: ANKNEY, KAREN
Address: 12810 TAMiami TrL. N
City-St-Zip: NAPLES, FL 34110

Title: VP (X) Change () Addition
Name: CRESPO, PAM
Address: 2535 NORTH BROOKE PLAZA DR # B
City-St-Zip: NAPLES, FL 34119

Title: VP (X) Change () Addition
Name: OLSON, CHRIS
Address: 2536 NORTH BROOKE PLAZA DR
City-St-Zip: NAPLES, FL 34119

I hereby certify that the information supplied with this filing does not qualify 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: KAREN ANKNEY

PO

04/17/2009

Electronic Signature of Signing Officer or Director

Date