

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006092

FILED
Apr 03, 2009
Secretary of State

Entity Name: TROPHY CLUB AT THE STRAND CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5672 STRAND CT
STE 1
NAPLES, FL 34110

New Principal Place of Business:

1035 COLLIER CENTER WAY
SUITE 7
NAPLES, FL 34110

Current Mailing Address:

5672 STRAND CT
STE 1
NAPLES, FL 34110

New Mailing Address:

1035 COLLIER CENTER WAY
SUITE 7
NAPLES, FL 34110

FEI Number: 65-0954556

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, SUSAN
1035 COLLIER CENTER WAY
SUITE #7
NAPLES, FL 34110 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: T () Delete
Name: AHLGIST, RICHARD
Address: 5983 TROPHY DR SUITE 1504
City-St-Zip: NAPLES, FL 34110

Title: P () Delete
Name: TESSMER, RICHARD
Address: 5983 TROPHY DRIVE # 1502
City-St-Zip: NAPLES, FL 34110

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DTS (X) Change () Addition
Name: AHLQUIST, RICHARD
Address: 5983 TROPHY DR #1504
City-St-Zip: NAPLES, FL 34110

Title: DP (X) Change () Addition
Name: TESSMER, RICHARD
Address: 5983 TROPHY DRIVE #1502
City-St-Zip: NAPLES, FL 34110

Title: D () Change (X) Addition
Name: ZUBROW, MIKE
Address: 6009 TROPHY DRIVE #801
City-St-Zip: NAPLES, FL 34110

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: RICHARD TESSMER

DP

04/03/2009

Electronic Signature of Signing Officer or Director

Date