## 2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

## Feb 09, 2005 8:00 am **Secretary of State DOCUMENT # 751005** 02-09-2005 90044 034 \*\*\*\*61.25 VANDERBILT SURF COLONY, A CONDOMINIUM, SECTION II, ASSOCIATION, INC. Principal Place of Business Mailing Address 15 BLUEBILL AVE NAPLES FL 34108 15 BLUEBILL AVE NAPLES FL 34108 50012267 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (10/04) Applied For City & State City & State 4. FEI Number 59-2099444 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SWALM & MURRELL, P.A. Street Address (P.O. Box Number is Not Acceptable) 2375 TAMIAMI TR N SUITE 308 NAPLES FL 33940 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2005 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Change Delete Jim Paresko 215 Blue Bill Ave Naples, 71. 34/08 RITCHIE, RICHARD E 15 BLUEBILL AVE STREET ADDRESS STREET ADDRESS NAPLES FL CITY-ST-7IP CITY-ST-7IP □ Detete .ddition TITL F TITLE HARRISON, LEE NAME NAME 15 BLUEBILL AVENUE STREET ADDRESS STREET ADDRESS NAPLES FL 34108 CITY-ST-7IP CITY-ST-ZIP VD ☐ Delete Change Addition ZUBER, CHRIS 15 BLUEBILL AVE STREET ADDRESS STREET ADDRESS CITY-ST-7IP NAPLES FL 34108 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition KUDZMA, JACK NAME NAME 15 BLUEBILL AVE. STREET ADDRESS STREET ADDRESS NAPLES FL 34108 CITY-ST-7tP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Channe ☐ Addition MARIN, JOANNE NAME NAME 15 BLUEBILL AVE STREET ADDRESS STREET ADDRESS NAPLES FL 34108 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete THILE ☐ Change ☐ Addition TITLE SHYKEN, CHARLENE NAME NAME 15 BLUEBILL AVE STREET ADDRESS STREET ADDRESS NAPLES FL CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED