


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2007 8:00 am
Secretary of State

05-02-2007 90101 015 ****61.25

DOCUMENT # N00274

1. Entity Name
LUCERNE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**3100 GULF SHORE BLVD. N.
 NAPLES, FL 34103 US**

Mailing Address
**6700 LONE OAK BLVD.
 NAPLES, FL 34109**

40101212



2. Principal Place of Business - No P.O. Box #
**do Resort Management
 2685 Horseshoe Dr. S. #215
 Naples, FL
 34104 US**

3. Mailing Address
**do Resort Management
 2685 Horseshoe Dr. S. #215
 Naples, FL
 34104 US**

04132007 Chg-NP CR2E037 (12/06)

4. FEI Number
59-2516607

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**GUARDIAN PROPERTY MANAGEMENT
 6700 LONE OAK BLVD.
 NAPLES, FL 34109**

7. Name and Address of New Registered Agent
 Name **Jay Van Den Berg**
 Street Address (P.O. Box Number is Not Acceptable)
3100 Gulfshore Blvd. N. #304
 City **Naples** FL Zip Code **34103**

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 *Jay Van Den Berg* **Jay Vandenberg Treas. 04/26/2007** DATE

Filing Fee is \$61.25 Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HUDSEN, JANET 3100 GULF SHORE BLVD N.#603 NAPLES, FL 34103 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KUZMA, MELISSA 3100 GULF SHORE BLVD N #601 NAPLES, FL 34103 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GUILLES, RICHARD 3100 GULF SHORE BLVD N #504 NAPLES, FL 34101 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CUNNINGHAM, JAMES 3100 GULF SHORE BLVD N., #204 NAPLES, FL 34103 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOWICK, KAREN 3100 GULF SHORE BLVD, N., #103 NAPLES, FL 34103 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Hudson, Courtenay 3100 Gulfshore Blvd. N. #603 NAPLES, FL 34103 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Kuzma, Melissa 3100 Gulfshore Blvd. N. #601 NAPLES, FL 34103 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Richard, Gillies 3100 Gulfshore Blvd. N. #504 NAPLES, FL 34103 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Cunningham, James 3100 Gulfshore Blvd. N. #204 NAPLES, FL 34103 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Van Den Berg, Jay 3100 Gulfshore Blvd. N. #304 NAPLES, FL 34103 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE: *Jay Van Den Berg* **Treas. 04/26/2007** DATE

Jay Van Den Berg