## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # N04000007370**

1. Entity Name

WEST BAY CLUB PROPERTY OWNERS ASSOCIATION, INC.



FILED May 11, 2006 08:00 Al Secretary of State

Principal Place of Business

22199 NATURES COVE COURT ESTERO, FL 33928

Mailing Address

22199 NATURES COVE COURT ESTERO, FL 33928



DO NOT WRITE IN THIS SPACE

05092006 No Chg-NP

CR2E037 (4/06)

4. FEI Number 32-0122495

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

VILNIUS, DONALD 22199 NATURES COVE COURT ESTERO, FL 33928

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ō.	The above named entity submits this statement for the pur	hose of critically is rediscus	s ource or redistrings after it or p	zar, ar the otate or ribride.	tenitonima mai ma cocott
	the obligations of registered agent.				
	the opingularia of registro on against				

SIGNATURE.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25 Due by September 6, 2006

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

D	ue by September 6, 2006	Trust Fund Contribution.				
10.	OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VILNIUS, DONALD 22199 NATURES COVE COURT ESTERO, FL 33928					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD NEVINS, DAVID 22140 RED LAUREL LANE ESTERO, FL 33928	•				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DEBERD, DONALD 20300 RIVERBROOKE RUN ESTERO, FL 33928					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ENGLISH, STEPHANIE 19000 SAPPHIRE SHORES #202 ESTERO, FL 33928					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PARKER, WM 20450 CHAPEL TRACE ESTERO, FL 33928					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KAHN, JEFF 22187 NATURES COVE ESTERO, FL 33928					

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12. I hereby certify that the information supplied with this filling 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

Doubly, DeBry
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/06

239)949-4269

Daylime Phone #