

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22064

FILED
Jan 05, 2011
Secretary of State

Entity Name: LE PARC CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4951 GULF SHORE BLVD NO
MANAGER'S OFFICE
NAPLES, FL 34103 US

New Principal Place of Business:

Current Mailing Address:

4951 GULF SHORE BLVD NO
MANAGER'S OFFICE
NAPLES, FL 34103 US

New Mailing Address:

FEI Number: 65-0182454 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PECK, DANIEL D C/O P
5801 PELICAN BAY BLVD
103, FIRST UNION BLG
NAPLES, FL 34108 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: D
Name: SCHELL, HARRY C III
Address: 4951 GULF SHORE BLVD #203
City-St-Zip: NAPLES, FL 34103

Title: PD
Name: CHANCEY, MALCOLM
Address: 4951 GULF SHORE BLVD N # 603
City-St-Zip: NAPLES, FL 34103

Title: TD
Name: STRAUSS, GARY
Address: 4951 GULF SHORE BLVD N #903
City-St-Zip: NAPLES, FL 34103

Title: D
Name: LEAF, JOHN
Address: 4951 GULF SHORE BLVD N #1402
City-St-Zip: NAPLES, FL 34103

Title: SD
Name: MEYER, RON
Address: 4951 GULF SHORE BLVD N #1802
City-St-Zip: NAPLES, FL 34103

Title: VD
Name: DIFAZIO, LOUIS T
Address: 4951 GULF SHORE BLVD N #1102
City-St-Zip: NAPLES, FL 34103

I hereby 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 all other like empowered.

SIGNATURE: GARY STRAUSS

T

01/05/2011

Electronic Signature of Signing Officer or Director

Date