2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 05, 2006 8:00 am
Secretary of State

05-05-2006 90189 010 ****61.25

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1st MOORE CR2E037 (10/05)

DOCUMENT # N24488

1. Entity Name

PRINCETON PLACE AT WIGGINS BAY PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
HORSECREEK DR NAPLES FL 34110 US	2335 9TH ST NO # 505 NAPLES FL US

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 65-0040195 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
WAGNER, THERESE A 2335 9TH ST NO # 505 NAPLES FL 34103	Name Street Address (P.O. Box Number is Not Acceptable) City FL 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) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2006

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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD SINCLAIR, JERRY 320 HORSE CREEK DR 501 NAPLES FL ☒ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	Giordano, Serafino 340 Horse Creek Dr. #108 Naples, Fl. 34110 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ANDLEFINGER, GEORGE 320 HORSE CREEK DR 403 NAPLES FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD VAN DUSEN, AL 340 HORSE CREEK DR 102 NAPLES FL 34110 ☐ Delete	TITLE VPD NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOWERS, JACQUELINE 300 HORSE CREEK DR 504 NAPLES FL 34110 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS STEIGER, JOAN 300 HORSE CREEK DR NAPLES FL 34110 ☐ Delete	TITLE VSD NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MACKAY, SALLY 320 HORSE CREEK DR. #107 NAPLES FL 34110 X☐ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	Haney, Richard 320 Horse Creek Dr. #505 Naples, Fl. 34110 ☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: [illegible] 4-25-06 239-403-7991