

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 29, 2009  
Secretary of State**

DOCUMENT# N25356

Entity Name: VANDERBILT BEACH MOTEL CONDOMINIUM, FIRST ADDITION, ASSOCIATION, INC.

**Current Principal Place of Business:**

9256 GULSHORE DR N  
NAPLES, FL 34108 US

**New Principal Place of Business:**

**Current Mailing Address:**

COLLIER FINANCIAL, INC.  
4985 TAMIAMI TRAIL E.  
NAPLES, FL 34113 US

**New Mailing Address:**

FEI Number: 65-0139182      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HART, STEPHEN P  
COLLIER FINANCIAL INC.  
4985 E. TAMIAMI TRAIL  
NAPLES, FL 34113 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: VD ( ) Delete  
Name: MOORE, MICHAEL  
Address: 9225 GULF SHORE DR., N  
City-St-Zip: NAPLES, FL 34108

Title: PD ( ) Delete  
Name: HICKS, LARRY  
Address: 19 BENJAMIN ST  
City-St-Zip: OLD GREENWICH, CT 06870

Title: TD ( ) Delete  
Name: PANARO, RICHARD  
Address: 14 ANTHONY RD  
City-St-Zip: N READING, MA 01864

Title: SD ( ) Delete  
Name: PELRIN, LINDA  
Address: C-4 PARKVIEW DR  
City-St-Zip: PLANTSVILLE, CT 06479

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Change (X) Addition  
Name: TYLER, CRAIG  
Address: 869 CROSSTREE LN  
City-St-Zip: SANDUSKY, OH 44870

Title: D ( ) Change (X) Addition  
Name: MOORE, TOM  
Address: 9225 GULF SHORE DR N  
City-St-Zip: NAPLES, FL 34108

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: LARRY HICKS

PD

04/29/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date