

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2005 8:00 am
Secretary of State

02-01-2005 90016 040 ****61.25

DOCUMENT # N37186	
1. Entity Name WINDJAMMER VILLAGE OF NAPLES, INC.	

Principal Place of Business 220 OCEAN BLVD NAPLES, FL 33942 US	Mailing Address 220 OCEAN BLVD NAPLES, FL 33942 US
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

40009761



01232005 Chg-NP CR2E037 (10/03)

4. FEI Number 65-0189175	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent ABEL, BAND, RUSSELL, COLLIER, PITCHFORD, GORDON ATTORNEYS AT LAW/MR. WILLIAM KORB P.O. BOX 9948-2240 S. PINEAPPLE AVE SARASOTA, FL 34236	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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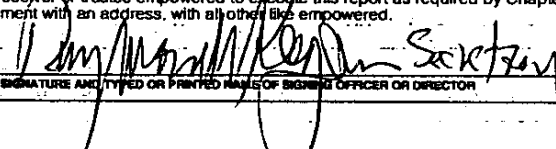
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE _____

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SORKILMO, BARBARA 159 SEVEN SEAS NAPLES, FL 34104 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PERRY, DAVID 83 PACIFIC WAY NAPLES, FL 34104 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T COCOZZA, MARCO 127 MEDITERRANEAN WAY NAPLES, FL 34104 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	RAYMOND KEEGAN-SEC. ☐ Change ☒ Addition 207 OCEANS BLVD NAPLES FL 34104
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WILLIAMS, THERESA 184 OCEANS BLVD NAPLES, FL 34104 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MICHAUD, NORMAN 66 ATLANTIC WAY NAPLES, FL 34104 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HARTMAN, BARBARA 53 OCEANS BLVD NAPLES, FL 34104 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR ☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:  JAN 28 2005 239-643-6880
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #