

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37186

FILED
Apr 09, 2009
Secretary of State

Entity Name: WINDJAMMER VILLAGE OF NAPLES, INC.

Current Principal Place of Business:

220 OCEAN BLVD
NAPLES, FL 33942 US

New Principal Place of Business:

Current Mailing Address:

220 OCEAN BLVD
NAPLES, FL 33942 US

New Mailing Address:

6700 LONE OAK BLVD
NAPLES, FL 34109 US

FEI Number: 65-0189175

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COMPASS GROUP PROPERTY MGMT
7900 TAMAMI TRAIL N.
SUITE 101
NAPLES, FL 34108 US

Name and Address of New Registered Agent:

GUARDIAN PROPERTY MANAGEMENT
6700 LONE OAK BLVD
NAPLES, FL 34109 US

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: BYRON ROSS

04/09/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: QUINN, HARRY
Address: 13 OCEANS BLVD.
City-St-Zip: NAPLES, FL 34104

Title: P () Delete
Name: HARTMAN, BARBARA
Address: 53 OCEANS BLVD.
City-St-Zip: NAPLES, FL 34104

Title: T () Delete
Name: BLANCHETTE, WILLIAM
Address: 204 OCEANS BLVD
City-St-Zip: NAPLES, FL 34104

Title: D () Delete
Name: TEETS, JAMES
Address: 101 OCEANS BLVD
City-St-Zip: NAPLES, FL 34104

Title: S () Delete
Name: REINHOLDT, AMY
Address: 64 ATLANTIC WAY
City-St-Zip: NAPLES, FL 34104

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: POWERS, GEORGE
Address: 109 OCEANS BLVD.
City-St-Zip: NAPLES, FL 34104

Title: VP (X) Change () Addition
Name: SORKILMO, BARBARA
Address: 184 OCEANS BLVD.
City-St-Zip: NAPLES, FL 34104

Title: T (X) Change () Addition
Name: BLANCHETTE, WILLIAM
Address: 203 OCEANS BLVD
City-St-Zip: NAPLES, FL 34104

Title: S (X) Change () Addition
Name: RHODES, JOYCE
Address: 67 ATLANTIC WAY
City-St-Zip: NAPLES, FL 34104

Title: D (X) Change () Addition
Name: REINHOLDT, AMY
Address: 64 ATLANTIC WAY
City-St-Zip: NAPLES, FL 34104

Title: D () Change (X) Addition
Name: MAURO, KASS
Address: 202 OCEANS BLVD
City-St-Zip: NAPLES, FL 34104

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: BYRON ROSS

MGR

04/09/2009

Electronic Signature of Signing Officer or Director

Date