

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003736

FILED
Mar 09, 2009
Secretary of State

Entity Name: LITTLE HARBOUR HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2177 GORDON DR
NAPLES, FL 34102 US

New Principal Place of Business:

Current Mailing Address:

2177 GORDON DR
NAPLES, FL 34102 US

New Mailing Address:

FEI Number: 59-3326942 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAVINSKI, JAMES E
2177 GORDON DR
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

DODSON, TOM L
2177 GORDON DR
NAPLES, FL 34102 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: TOM L. DODSON

03/09/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ZEISLER, KEN
Address: 275 LITTLE HARBOUR LANE
City-St-Zip: NAPLES, FL 34102

Title: S () Delete
Name: EIDE, LULIE
Address: 340 LITTLE HARBOUR LN
City-St-Zip: NAPLES, FL 34102

Title: DT () Delete
Name: SEASS, ROBERT
Address: 224 LITTLE HARBOUR LANE
City-St-Zip: NAPLES, FL 34102

Title: P () Delete
Name: PETTWAY, GEORGE
Address: 2177 GORDON DRIVE
City-St-Zip: NAPLES, FL 34102

Title: D () Delete
Name: SIGEL, LLOYD
Address: 265 LITTLE HARBOUR LANE
City-St-Zip: NAPLES, FL 34102

Title: D () Delete
Name: KELLER, ALAN
Address: 298 LITTLE HARBOUR LN
City-St-Zip: NAPLES, FL 34102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: EIDE, LULIE
Address: 340 LITTLE HARBOUR LN
City-St-Zip: NAPLES, FL 34102

Title: DT (X) Change () Addition
Name: SEASS, ROBERT
Address: 248 LITTLE HARBOUR LANE
City-St-Zip: NAPLES, FL 34102

Title: S (X) Change () Addition
Name: PETTWAY, GEORGE
Address: 2177 GORDON DRIVE
City-St-Zip: NAPLES, FL 34102

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

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

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: TOM L. DODSON

MGR

03/09/2009

Electronic Signature of Signing Officer or Director

Date