


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

FILED
Apr 06, 2006 8:00 am
Secretary of State

04-06-2006 90019 016 ****61.25

DOCUMENT # N98000005469

1. Entity Name
VANDERBILT COMMUNITY ASSOCIATION, INC.



Principal Place of Business Mailing Address

**8250 DANBURY BLVD
NAPLES FL 34120** **8250 DANBURY BLVD
NAPLES FL 34120**



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 Applied For

59-3520481 Not Applicable

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

1st MOORE CR2E037 (10/05)

6. Name and Address of Current Registered Agent

**BUSH, ROBERT
8250 DANBURY BLVD
NAPLES FL 34120**

7. Name and Address of New Registered Agent

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

TITLE	DT	<input type="checkbox"/> Delete
NAME	DAVIDSON, DENIS	
STREET ADDRESS	8250 DANBURY BOULEVARD	
CITY-ST-ZIP	NAPLES FL 34120	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	PEDERSON, DAVID	
STREET ADDRESS	8250 DANBURY BLVD	
CITY-ST-ZIP	NAPLES FL 34120	
TITLE	DS	<input type="checkbox"/> Delete
NAME	LONG, CHARLES	
STREET ADDRESS	8250 DANBURY BOULEVARD	
CITY-ST-ZIP	NAPLES FL 34120	
TITLE	DP	<input type="checkbox"/> Delete
NAME	BUSH, ROBERT	
STREET ADDRESS	8250 DANBURY BLVD	
CITY-ST-ZIP	NAPLES FL 34120	
TITLE	DVP	<input checked="" type="checkbox"/> Delete
NAME	LEWIS, GERALD	
STREET ADDRESS	8250 DAN BURY BLVD	
CITY-ST-ZIP	NAPLES FL 34120	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JOAN CAPIELLO	
STREET ADDRESS	8241 ALLENDALECT	
CITY-ST-ZIP	NAPLES, FL 34120	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DANIEL GRITTI	
STREET ADDRESS	8231 PARKSTONE PL #204	
CITY-ST-ZIP	NAPLES FL 34120	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: X John A. Laliberte General Manager/COO 03/25/2006 239.348.2662