

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17459

FILED
Apr 23, 2008
Secretary of State

Entity Name: REGENT PARK MASTER ASSOCIATION, INC.

Current Principal Place of Business:

MOORE PROPERTY MANAGEMENT, LLC
745 12TH AVE. S. #AA
NAPLES, FL 34102 US

New Principal Place of Business:

Current Mailing Address:

MOORE PROPERTY MANAGEMENT, LLC
745 12TH AVE. S. #AA
NAPLES, FL 34102 US

New Mailing Address:

FEI Number: 59-2756989

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORE PROPERTY MANAGEMENT
745 12TH AVE. S. #AA
NAPLES, FL 34102 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: VP () Delete
Name: SHADE, BILL
Address: 10261 REGENT CIRCLE
City-St-Zip: NAPLES, FL 34109

Title: D () Delete
Name: BRENNAN, MARK
Address: 10401 REGENT CIR
City-St-Zip: NAPLES, FL 34109

Title: S () Delete
Name: MACPHEE, CHERYL
Address: 10139 SAILFISH LANE
City-St-Zip: NAPLES, FL 34109

Title: T () Delete
Name: JOHN, FLORENCE
Address: 10170 REGENT CIRCLE
City-St-Zip: NAPLES, F; 34109

Title: P () Delete
Name: LIBERTI, ERNEST
Address: 10320 REGENT CIR
City-St-Zip: NAPLES, FL 34109

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: GUERNSEY, DAN
Address: 10640 REGENT CIRCLE
City-St-Zip: NAPLES, FL 34109

Title: D (X) Change () Addition
Name: FULKER, GLEN
Address: 3342 ARLETTE DR
City-St-Zip: NAPLES, FL 34109

Title: D (X) Change () Addition
Name: LOBODA, MATTHEW
Address: 10131 SAILFISH LANE
City-St-Zip: NAPLES, FL 34109

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: ERNEST LIBERTI

P

04/23/2008

Electronic Signature of Signing Officer or Director

Date