## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N17459

FILED Apr 23, 2009 Secretary of State

Entity Name: REGENT PARK MASTER ASSOCIATION, INC.

current P	rincipal Plac	e of Business:	New Principal Plac	e of Business:	
45 12TH	AVE. S. #AA	ANAGEMENT, LLC JS			
current Mailing Address:			New Mailing Addre	New Mailing Address:	
45 12TH	PROPERTY M. AVE. S. #AA FL 34102	ANAGEMENT, LLC JS			
El Number	: 59-2756989	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
lame and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:	
45 12TH IAPLES, The above		JS	ourpose of changing its register	red office or registered agent, or both,	
n the Stat	e of Florida.				
SIGNATU	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
FFICER	Electro S AND DIREC			Date  GES TO OFFICERS AND DIRECTOR	
itle: ame: ddress:	S AND DIREC	CTORS:  ) Delete  )AN  IT CIRCLE			
tle: ame: ddress: ity-St-Zip: tle: ame: ddress:	VP ( GUERNSEY, I 10640 REGEN NAPLES, FL	Delete DAN IT CIRCLE 34109 ) Delete N E DR	ADDITIONS/CHANG Title: Name: Address:	SES TO OFFICERS AND DIRECTOR	
itle: ame: ddress: ity-St-Zip: itle: ame: ddress: ity-St-Zip: itle: ame: ddress:	VP ( GUERNSEY, I 10640 REGEN NAPLES, FL 3  D ( FULKER, GLE 3342 ARLETT NAPLES, FL 3	Delete DAN IT CIRCLE 84109  ) Delete N E DR 84109  ) Delete THEW SH LANE	ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name: Address:	GES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition	
DFFICER  itle: ame: ddress: ity-St-Zip: itle: ame: ddress: ity-St-Zip: itle: ame: ddress: ity-St-Zip: itle: ame: ddress: ity-St-Zip:	VP ( GUERNSEY, E 10640 REGEN NAPLES, FL 3  D ( FULKER, GLE 3342 ARLETT NAPLES, FL 3  D ( LOBODA, MAT 10131 SAILFIS NAPLES, FL 3	Delete DAN IT CIRCLE 34109  ) Delete N E DR 34109  ) Delete THEW SH LANE 34109  ) Delete TORCLE TORCLE	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address: Address: Address:	GES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition  ( ) Change ( ) Addition	

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 04/23/2009