

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003327

FILED
Apr 29, 2009
Secretary of State

Entity Name: SERAFINA AT TIBURON HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2874 TIBURON BLVD E
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

2874 TIBURON BLVD E
NAPLES, FL 34109

New Mailing Address:

%COLLIER FINANCIAL
4985 TAMiami TrL E
NAPLES, FL 34113

FEI Number: 65-1124404

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAPLES-LAWDOCK, INC
1395 PANTHER LANE STE 300
NAPLES, FL 34109 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: PD () Delete
Name: HALL, DEBRA
Address: 2874 TIBURON BLVD E
City-St-Zip: NAPLES, FL 34109

Title: VPD () Delete
Name: PEDONE, MIKE
Address: 2874 TIBURON BLVD E
City-St-Zip: NAPLES, FL 34109

Title: TD () Delete
Name: RODA, FRANK
Address: 2874 TIBURON BLVD E
City-St-Zip: NAPLES, FL 34109

Title: SD () Delete
Name: POWELL, GEORGE
Address: 2874 TIBURON BLVD E
City-St-Zip: NAPLES, FL 34109

Title: D () Delete
Name: DUPLER, SALLY
Address: 2874 TIBURON BLVD E
City-St-Zip: NAPLES, FL 34109

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change () Addition
Name: SWEENEY, THOMAS
Address: 2912 TIBURON BLVD E
City-St-Zip: NAPLES, FL 34109

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

Title: VD (X) Change () Addition
Name: POWELL, GEORGE
Address: 2874 TIBURON BLVD E
City-St-Zip: NAPLES, FL 34109

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: DEBRA HALL

PD

04/29/2009

Electronic Signature of Signing Officer or Director

Date