

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005000

FILED
Apr 27, 2011
Secretary of State

Entity Name: VILLAGES AT STELLA MARIS MASTER ASSOCIATION, INC.

Current Principal Place of Business:

CAYS DR AND STELLA MARIS DR. N
NAPLES, FL 34114 US

New Principal Place of Business:

Current Mailing Address:

C/O PROFESSIONAL COMMUNITY SERVICE OF SW F
PO BOX 110156
NAPLES, FL 34108 US

New Mailing Address:

FEI Number: 76-0722326

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITE, WILLIAM D CAM
2310 DELLA DRIVE
NAPLES, FL 34117 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: DP
Name: MCNALLY, CAROL
Address: 255 CAYS DR #2001
City-St-Zip: NAPLES, FL 34114 US

Title: DVP
Name: OLIVA, RICK
Address: 275 CAYS DR #2204
City-St-Zip: NAPLES, FL 34114 US

Title: DT
Name: TOMEK, KEN A
Address: 360 STELLA MARIS DR N #2403
City-St-Zip: NAPLES, FL 34114 US

Title: D
Name: KELLY, DAN
Address: 265 CAYS DR #2102
City-St-Zip: NAPLES, FL 34114

Title: SMA
Name: WHITE, WILLIAM D CAM
Address: PO BOX 110156
City-St-Zip: NAPLES, FL 34108

Title: D
Name: SMITH, LEROY
Address: 380 STELLA MARIS DR
City-St-Zip: NAPLES, FL 34114

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM D. WHITE

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04/27/2011

Electronic Signature of Signing Officer or Director

Date