

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30820

Entity Name: ARBORESQUE OF OLDE NAPLES, CONDOMINIUM
ASSOCIATION, INC.

Current Principal Place of Business:

291 4TH STREET S
NAPLES, FL 34102

Current Mailing Address:

C/O GULF VIEW PROPERTY MGMT, INC
2335 9TH STREET N #505
NAPLES, FL 34103

FEI Number: 65-0203439

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GULF VIEW PROPERTY MGMT, INC
2335 9TH STREET N #505
NAPLES, FL 34103 US

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

Officer/Director Detail :

Title P
Name LANNING, JOHN
Address 295 -4TH ST SO
City-State-Zip: NAPLES FL 34102

Title T
Name MAST, RUTH
Address 291 -4TH ST SO
City-State-Zip: NAPLES FL 34102

Title S
Name LANNING, JUDITH
Address 568 9TH ST. S.
City-State-Zip: NAPLES FL 34103

Title V. PRESIDENT
Name COHEN, MARILYN
Address 1023 SHERIDAN RD
City-State-Zip: EVANSTON IL 60202

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: RUTH MAST

TREASURER

03/15/2013

Electronic Signature of Signing Officer/Director Detail

Date