

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N48538

**Entity Name:** WEST SHORE VILLAS OF NAPLES OWNERS' ASSOCIATION, INC.

**FILED**  
**Feb 03, 2014**  
**Secretary of State**  
**CC1700978496**

**Current Principal Place of Business:**

4862 - 4874 WEST BLVD CT.  
NAPLES, FL 34103

**Current Mailing Address:**

2335 9TH ST N  
505  
NAPLES, FL 34103 US

**FEI Number: 65-0336790**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

GULF VIEW PROPERTY MGMT  
2335 9TH ST 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            REC  
Name            WAGNER, THERESE  
Address        2335 9TH STREET NORTH #505  
City-State-Zip: NAPLES FL 34103

*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: THERESE WAGNER**

**RECEIVER**

**02/03/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date