

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000001407

**Entity Name:** PARK CENTRAL CONDOMINIUM ASSOCIATION OF NAPLES, INC.

**FILED**  
**Apr 25, 2013**  
**Secretary of State**  
**CC4438068351**

**Current Principal Place of Business:**

3400 TAMIAMI TRAIL NORTH  
302  
NAPLES, FL 34103

**Current Mailing Address:**

3400 TAMIAMI TRAIL NORTH  
302  
NAPLES, FL 34103 US

**FEI Number: 59-3555615**

**Certificate of Status Desired: No**

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

COLLIER ASSOCIATION MANAGEMENT  
3400 TAMIAMI TRAIL NORTH  
302  
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	VPT
Name	ALDERUCCIO, MARK
Address	5425 PARK CENTRAL CT
City-State-Zip:	NAPLES FL 34109
Title	D
Name	VIENZA, MARCEL
Address	5415 PARK CENTRAL COURT
City-State-Zip:	NAPLES FL 34109

Title	PD
Name	MEUERS, LAWRENCE
Address	5395 PARK CENTRAL CT
City-State-Zip:	NAPLES FL 34109

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: LAWRENCE MEUERS**

**PRESIDENT**

**04/25/2013**

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

\_\_\_\_\_  
Date