

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712529

FILED  
Apr 16, 2009  
Secretary of State

Entity Name: MOORINGS BAY APARTMENTS, INC.

## Current Principal Place of Business:

322 HARBOUR DRIVE  
NAPLES, FL 33940

## New Principal Place of Business:

322 HARBOUR DRIVE  
NAPLES, FL 34103

## Current Mailing Address:

C/O MELDON CONSULTANTS  
4949 TAMiami TR NORTH SUITE 201  
NAPLES, FL 341033017

## New Mailing Address:

FEI Number: 59-1212832      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MOORE, WILLIAM S  
C/O MELDON CONSULTANTS  
4949 TAMiami TR NORTH SUITE 201  
NAPLES, FL 341033017 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 ( ) Delete  
Name: SAMUELSON, LINDA  
Address: 322 HARBOUR DR APT 107-B  
City-St-Zip: NAPLES, FL 34103

Title: DT ( ) Delete  
Name: DAVISS, JONN  
Address: 222 HARBOR DR. APT 106-C  
City-St-Zip: NAPLES, FL 34103

Title: DS ( ) Delete  
Name: STEINER, BARBARA  
Address: 322 HARBOUR DR APT 103-A  
City-St-Zip: NAPLES, FL 34103

Title: D ( ) Delete  
Name: FOSS, RICHARD  
Address: 322 HARBOUR DR., APT 108- C  
City-St-Zip: NAPLES, FL 34103

Title: D ( ) Delete  
Name: COOKE, DON  
Address: 322 HARBOUR DR., APT 306-C  
City-St-Zip: NAPLES, FL 34103

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DVPT (X) Change ( ) Addition  
Name: DAVISS, JONN  
Address: 222 HARBOR DR. APT 106-C  
City-St-Zip: NAPLES, FL 34103

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

Title: D (X) Change ( ) Addition  
Name: STROM, LOUIS  
Address: 322 HARBOUR DR., APT 308- C  
City-St-Zip: NAPLES, FL 34103

Title: D (X) Change ( ) Addition  
Name: COOTE, DON  
Address: 322 HARBOUR DR., APT 306-C  
City-St-Zip: NAPLES, FL 34103

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: LINDA SAMUELSON

DP

04/16/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date