

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712529

FILED
Apr 25, 2011
Secretary of State

Entity Name: MOORINGS BAY APARTMENTS, INC.

Current Principal Place of Business:

322 HARBOUR DRIVE
NAPLES, FL 34103

New Principal Place of Business:

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
Name: SAMUELSON, LINDA
Address: 322 HARBOUR DR APT 107-B
City-St-Zip: NAPLES, FL 34103

Title: DVPT
Name: DAVIS, JONN
Address: 322 HARBOR DR. APT 106-C
City-St-Zip: NAPLES, FL 34103

Title: D
Name: RICHARD, FOSS
Address: 322 HARBOUR DR APT 103-A
City-St-Zip: NAPLES, FL 34103

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

Title: DS
Name: FARINA, CIRO
Address: 322 HARBOUR DR., APT 105-B
City-St-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: JOHN DAVIS

DVPT

04/25/2011

Electronic Signature of Signing Officer or Director

Date