

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716512

FILED
Apr 16, 2009
Secretary of State

Entity Name: REGENCY TOWERS OF NAPLES, INC.

Current Principal Place of Business:

3401 GULF SHORE BLVD N
NAPLES, FL 34103 US

New Principal Place of Business:

Current Mailing Address:

C/O MELDON CONSULTANTS
4949 TAMiami TRAIL N. SUITE #201
NAPLES, FL 34103 US

New Mailing Address:

FEI Number: 59-1307429 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 TRAIL N.
NAPLES, FL 34103 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: BERRY, RICHARD
Address: 3401 GULF SHORE BLVD N #403
City-St-Zip: NAPLES, FL 34103

Title: D () Delete
Name: PEAY, JOHN H
Address: 3401 GULF SHORE BLVD NORTH #401
City-St-Zip: NAPLES, FL 34103

Title: DVP () Delete
Name: FOX, ROBERT
Address: 34011 GULF SHORE BLVD N #104
City-St-Zip: NAPLES, FL 34103

Title: TD () Delete
Name: NIXON, CHASE
Address: 3401 GULF SHORE BLVD N. # 102
City-St-Zip: NAPLES, FL 34103

Title: D () Delete
Name: TINMOUTH, THOMAS
Address: 3401 GULF SHORE BLVD N 402
City-St-Zip: NAPLES, FL 34103

Title: DS () Delete
Name: COAKLEY, ROBERT S
Address: 2401 GULF SHORE BLVD. N. #606
City-St-Zip: NAPLES, FL 34103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT (X) Change () Addition
Name: BERRY, RICHARD
Address: 3401 GULF SHORE BLVD N #403
City-St-Zip: NAPLES, FL 34103

Title: DP (X) Change () Addition
Name: PEAY, JOHN H
Address: 3401 GULF SHORE BLVD NORTH #401
City-St-Zip: NAPLES, FL 34103

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

Title: D (X) Change () Addition
Name: NIXON, CHASE
Address: 3401 GULF SHORE BLVD N. # 102
City-St-Zip: NAPLES, FL 34103

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

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

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: JOHN H. PEAY

DP

04/16/2009

Electronic Signature of Signing Officer or Director

Date