

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716701

FILED
Apr 23, 2009
Secretary of State

Entity Name: VANDERBILT TOWERS, UNIT #1 OF NAPLES, INC.

Current Principal Place of Business:

C/O R&P PROPERTY MANAGEMENT
265 AIRPORT RD S
NAPLES, FL 34104

New Principal Place of Business:

Current Mailing Address:

C/O R&P PROPERTY MANAGEMENT
265 AIRPORT RD S
NAPLES, FL 34104

New Mailing Address:

FEI Number: 59-1315403

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

R & P PROPERTY MANAGEMENT
265 AIRPORT RD S
NAPLES, FL 34104 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: PD () Delete
Name: TURNER, LARRY
Address: 1 BLUEBILL AVE. #504
City-St-Zip: NAPLES, FL 34108

Title: TD () Delete
Name: DOAN, LOU
Address: 15191 CEDARWOOD LANE #2201
City-St-Zip: NAPLES, FL 34110

Title: VPD () Delete
Name: MACKRIS, CARL
Address: 1 BLUEBILL AVE. #704
City-St-Zip: NAPLES, FL 34108

Title: SD () Delete
Name: WOODS, ALFRED
Address: 1 BLUEBILL AVE #307
City-St-Zip: NAPLES, FL 34108

Title: D () Delete
Name: ROGERS, ROBERT
Address: P.O. BOX 158
City-St-Zip: HARRISON, ME 04040

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: LARRY TURNER

PD

04/23/2009

Electronic Signature of Signing Officer or Director

Date