

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716702

FILED  
Apr 03, 2009  
Secretary of State

Entity Name: VANDERBILT TOWERS OF NAPLES INC.

**Current Principal Place of Business:**

#3 BLUEBILL AVENUE  
NAPLES, FL 34108

**New Principal Place of Business:**

**Current Mailing Address:**

#3 BLUEBILL AVENUE  
NAPLES, FL 34108

**New Mailing Address:**

FEI Number: 59-1378595      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MARTENS, ROBERT A DR.  
3 BLUEBILL AVENUE  
#506  
NAPLES, FL 34108 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: MARTENS, ROBERT A DR.  
Address: 5610 SUNRISE TRAIL  
City-St-Zip: MADISON LAKE, MN 56063

Title: SD ( ) Delete  
Name: WALKER, LILLIAN  
Address: 3570 WOODLAND DR.  
City-St-Zip: HIGHLAND, MI 48356

Title: VPD ( ) Delete  
Name: CHESMEL, DAVID  
Address: 201 SILVERSIDE AVENUE  
City-St-Zip: LITTLE SILVER, NJ 07739

Title: TD ( ) Delete  
Name: MARSTON, GLEN  
Address: 22 WOODCREST RD.  
City-St-Zip: MANCHESTER, MA 01944

Title: D ( ) Delete  
Name: CHILDS, JOAN  
Address: 3 BLUEBILL AVENUE #612  
City-St-Zip: NAPLES, FL 34108

Title: D ( ) Delete  
Name: ROCKETT, EDWARD  
Address: 18 DRIFTWOOD RD.  
City-St-Zip: MARBLEHEAD, MA 01945

**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:

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: ROBERT A. MARTENS

PRES

04/03/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date