2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#719949

FILED Mar 25, 2009 Secretary of State

Entity Name: PORT ROYAL PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 1020 EIGHTH AVE S STE 3 NAPLES, FL 341026959 **Current Mailing Address: New Mailing Address:** 1020 EIGHTH AVE S STE 3 NAPLES, FL 341026959 FEI Number: 59-1321272 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CRONIN, DENNIS P ESQ GOLDMAN, ELLEN A ESQ PORTER WRIGHT MORRIS & ARTHUR LLP PORTER WRIGHT MORRIS & ARTHUR LLP 5801 PELICAN BAY BOULEVARD 5801 PELICAN BAY BOULEVARD NAPLES, FL 34108 US NAPLES, FL 34108 US 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: ELLEN A. GOLDMAN, ESQ 03/25/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition SWANDER, ROBERT Name: Name: 2560 HALFMOON WALK Address: Address: City-St-Zip: NAPLES, FL 34102 City-St-Zip: Title: VD () Delete Title: () Change () Addition TURK, CYNTHIA Name: Name: Address: 1052 SPYGLASS LANE Address: City-St-Zip: NAPLES, FL 34102 City-St-Zip: Title: 2VPD () Delete Title: 2VPD (X) Change () Addition LINNEMAN, SANDRA Name: VERNON, WILLIAM F Name: 1570 GALLEON DRIVE Address: 980 GALLEON DRIVE Address: City-St-Zip: NAPLES, FL 34102 City-St-Zip: NAPLES, FL 34102 Title: PD () Delete Title: PD (X) Change () Addition Name: BOTHE, STEFAN Name: BOTHE, STEFAN R 950 NELSON S WALK Address: Address: 950 NELSON S WALK City-St-Zip: NAPLES, FL 34102 City-St-Zip: NAPLES, FL 34102 Title: Title: () Delete () Change () Addition GUSSENHOVEN, HARIETTE Name: Name: 859 NELSON'S WALK Address: Address: City-St-Zip: NAPLES, FL 34102 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: STEFAN R. BOTHE PD 03/25/2009