

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725773

FILED  
Mar 14, 2012  
Secretary of State

**Entity Name:** SORRENTO VILLAS OF NAPLES, INC.

**Current Principal Place of Business:**

1400 POMPEI LANE  
NAPLES, FL 33940 US

**New Principal Place of Business:**

1400 POMPEI LANE  
NAPLES, FL 34103 US

**Current Mailing Address:**

1040 6TH AVE N  
NAPLES, FL 34102

**New Mailing Address:**

2338 IMMOKALEE RD  
SUITE #176  
NAPLES, FL 34110

**FEI Number:** 59-1665463

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DYER, DENNIS  
C & D MANAGEMENT COMPANY LLC  
2338 IMMOKALEE RD - SUITE #176  
NAPLES, FL 34110 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: P  
Name: MITCHELL, JANET  
Address: 1400 POMPEI LN #34  
City-St-Zip: NAPLES, FL 34103

Title: VP  
Name: LAUGHLIN, JOAN  
Address: 1400 POMPEI LN #28  
City-St-Zip: NAPLES, FL 34103

Title: D  
Name: MIELE, ROBERT  
Address: 1400 POMPEI LN #22  
City-St-Zip: NAPLES, FL 34103

Title: S  
Name: SAUNDERS, RHONA  
Address: 3770 PARKVIEW WAY  
City-St-Zip: NAPLES, FL 34103

Title: T  
Name: MICHAEL, MARCOTTE  
Address: 1400 POMPEI LANE # 3  
City-St-Zip: NAPLES, FL 34103 UN

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: JANET MITCHELL

P

03/14/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date