

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727629

FILED
Apr 28, 2009
Secretary of State

Entity Name: NAPLES FOUR WINDS, INC.

Current Principal Place of Business:

1145 LITTLE NECK COURT
NAPLES, FL 34102 US

New Principal Place of Business:

Current Mailing Address:

1145 LITTLE NECK COURT
NAPLES, FL 34102

New Mailing Address:

FEI Number: 59-1974138

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GULF VIEW PROPERTY MGMT
2335 9TH ST. N SUITE 505
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: D () Delete
Name: GILLETTE TRUE, BARBARA
Address: 1240 BLUE POINT AVE, B11
City-St-Zip: NAPLES, FL 34102

Title: PD () Delete
Name: WALKER, FERNE
Address: 1140 LITTLE NECK CT D33
City-St-Zip: NAPLES, FL 34102

Title: D () Delete
Name: GASTON, JOAN
Address: 1240 BLUE POINT AVE
City-St-Zip: NAPLES, FL 34102

Title: D () Delete
Name: BEDNAR, ALAN
Address: 1280 BLUE POINT AVE, C-29
City-St-Zip: NAPLES, FL 34102

Title: D () Delete
Name: BAILEY, JAMES
Address: 1240 BLUE POINT AVE, B19
City-St-Zip: NAPLES, FL 34102

Title: STD () Delete
Name: CACCAMISE, FRANK
Address: 1200 BLUE POINT AVE
City-St-Zip: NAPLES, FL 34102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change () Addition
Name: GASTON, JOAN
Address: 1240 BLUE POINT AVE
City-St-Zip: NAPLES, FL 34102

Title: VPD (X) Change () Addition
Name: BEDNAR, ALAN
Address: 1280 BLUE POINT AVE, C-29
City-St-Zip: NAPLES, FL 34102

Title: SD (X) Change () Addition
Name: BREWER, CRAIG
Address: 1100 LITTLE NECK COURT F52
City-St-Zip: NAPLES, F 34102

Title: D (X) Change () Addition
Name: SCHINDLER, MIKE
Address: 1125 LITTLE NECK COURT G63
City-St-Zip: NAPLES, FL 34102

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: FERNE WALKER

PD

04/28/2009

Electronic Signature of Signing Officer or Director

Date