2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744162

FILED Mar 20, 2009 Secretary of State

Entity Name: VANDERBILT SURF COLONY CONDOMINIUM, PHASE 1, ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 11 BLUEBILL AVE. NAPLES, FL 34108 US **Current Mailing Address: New Mailing Address:** 11 BLUEBILL AVE NAPLES, FL 34108 US FEI Number: 59-2094113 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: STAMMERS, KAY 11 BLUEBILL AVENUE., APT 1004 NAPLES, FL 34108 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete HORSTEN, KARL DIR Name: Name: 11 BLUEBILL AVE Address: Address: City-St-Zip: NAPLES, FL 34108 City-St-Zip: Title: () Delete Title: () Change () Addition STAMMERS, KAY PRES Name: Name: Address: 11 BLUEBILL AVE Address: City-St-Zip: NAPLES, FL 34108 City-St-Zip: Title: () Delete Title: (X) Change () Addition EICH, ROBERT L TREAS Name: REASE, WARREN TREAS Name: Address: 11 BLUEBILL AVE Address: 11 BLUEBILL AVE City-St-Zip: NAPLES, FL 34108 City-St-Zip: NAPLES, FL 34108 Title: () Delete Title: () Change () Addition Name: GROH, HERMAN V. P. Name: 11 BLUEBILL AVE Address: Address: City-St-Zip: NAPLES, FL 34108 City-St-Zip: Title: () Delete Title: (X) Change () Addition MILLER, REEDER D PETRILLO, ANN DIR Name: Name: 11 BLUEBILL AVE 11 BLUEBILL AVE Address: Address: City-St-Zip: NAPLES, FL 34108 City-St-Zip: NAPLES, FL 34108 Title: () Delete Title: () Change () Addition DEE. SANDRA S Name: Name: Address: 11 BLUEBILL AVE Address: NAPLES, FL 34108 City-St-Zip: 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: KAY STAMMERS PRES 03/20/2009