## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 744380** 

Entity Name: COMMONS "W" ASSOCIATION, INC.

FILED Apr 26, 2005 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

GULFSHORE BLVD N 4901 GULFSHORE BLVD N NAPLES, FL 34103 US NAPLES, FL 34103

**Current Mailing Address: New Mailing Address:** 

PO BOX 10249 NAPLES, FL 34101

FEI Number: 65-0309659 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:

PELICAN BAY PROPERTY MANAGMENT 10823 TAMIAMI TRAIL NORTH STE H 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:

Date

## Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

## **OFFICERS AND DIRECTORS:**

() Delete (X) Change ( ) Addition EVANS, JOHN Name: EVANS, JOHN Name:

4651 GULFSHORE BLVD N #504 Address: 4651 GULFSHORE BLVD N #504 Address:

City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 34103

Title: SD Title: (X) Change ( ) Addition () Delete

Name: EARLE, JANE Name: EARLE, JANE Address: 4951 GULFSHORE BLVD #1803 Address: 4951 GULFSHORE BLVD #1803

City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 34103

Title: () Delete Title: (X) Change ( ) Addition

CHIVETTA, TONY CHIVETTA, TONY Name: Name: 4901 GULFSHORE BLVD N #201 4901 GULFSHORE BLVD N #201 Address:

Address: City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 34103

Title: VD () Delete Title: PD (X) Change ( ) Addition

KIRK, ROBERT Name: Name: HARRIS, SCOTT Address: 4737 VILLA MARE LANE Address: 4717 VILLA MARE LANE City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 34103

Title: () Delete Title: (X) Change ( ) Addition

DELUCA, CARL DR DELUCA, CARL DR Name: Name:

4751 GULFSHORE BLVD N #1601 4751 GULFSHORE BLVD N #1601 Address: Address:

NAPLES, FL 34103 NAPLES, FL 34103 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SCOTT HARRIS PD 04/26/2005