

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744380

FILED
Apr 28, 2008
Secretary of State

Entity Name: COMMONS "W" ASSOCIATION, INC.

Current Principal Place of Business:

4901 GULFSHORE BLVD N
NAPLES, FL 34103 US

New Principal Place of Business:

Current Mailing Address:

COLLIER FINANCIAL, INC.
4985 TAMiami TRAIL E.
NAPLES, FL 34113

New Mailing Address:

FEI Number: 65-0309659 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PELICAN BAY PROPERTY MANAGMENT
10823 TAMiami TRAIL NORTH
STE H
NAPLES, FL 34108 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: EVANS, JOHN
Address: 4651 GULFSHORE BLVD N #504
City-St-Zip: NAPLES, FL 34103

Title: PD () Delete
Name: EARLE, JANE
Address: 4951 GULFSHORE BLVD #1803
City-St-Zip: NAPLES, FL 34103

Title: VD () Delete
Name: CHIVETTA, TONY
Address: 4901 GULFSHORE BLVD N #201
City-St-Zip: NAPLES, FL 34103

Title: SD () Delete
Name: SARNO, NED
Address: 4708 VILLA MARE LANE
City-St-Zip: NAPLES, FL 34103

Title: TD () Delete
Name: DELUCA, CARL DR
Address: 4751 GULFSHORE BLVD N #1601
City-St-Zip: NAPLES, FL 34103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: () Change () Addition
Name:
Address:
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: JANE EARLE

PD

04/28/2008

Electronic Signature of Signing Officer or Director

Date