2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745672

US

FILED Apr 19, 2009 Secretary of State

Entity Name: PARK PLACE OF NAPLES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

4126 BELAIR LANE NAPLES, FL 34103

Current Mailing Address: New Mailing Address:

C/O MELDON CONSULTANTS 4126 BELAIR LANE NAPLES, FL 34103 US 4949 TAMIAMI TRL N STE 201 NAPLES, FL 341033017 US

FEI Number: 59-1977502 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:

MOORE, WILLIAM CAM C/O MELDON CONSULTANTS 4949 TAMIAMI TRL N STE 201 NAPLES, FL 341033017 US

OFFICERS AND DIRECTORS:

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DVP () Delete (X) Change () Addition SCHROLL, BETTY EDWARDS, TERESA A Name: Name: 4126 BELAIR LANE #B-10 Address: 4126 BELAIR LANE, APT B2 Address: City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 341033144

Title: Title: (X) Change () Addition () Delete DIMATTIES, ALFRED Name: GARRETSON, MARY A Name:

Address: 4126 BELAIR LN A6 Address: 4126 BELAIR LANE, APT C5 City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 341033189

Title: () Delete Title: (X) Change () Addition GIFFORD, LAWRENCE GIFFORD, LAWRENCE Name: Name:

Address: 4126 BELAIR LANE B-8 Address: 4126 BELAIR LANE, APT B8 City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 341033174

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

ANDERSON, BETTY Name: Name: BOMBARA, JAMES R 4126 BELAIR LANE C-1 Address: Address: 4126 BELAIR LANE, APT B7 City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 341033174

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

HAMILTON, BETTY HAMILTON, BETTY Name: Name: 4126 BELAIR LANE #C-4 4126 BELAIR LANE, APT C4 Address: Address: City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 341033189

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: LAWRENCE L. GIFFORD DP 04/19/2009