2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2006 08:00 AM
Secretary of State

DOCUMENT # 747740

1. Entity Name
NAPLES MARINA VILLAS, INC.

Principal Place of Business	Mailing Address
995 9TH AVE S NAPLES, FL 34102 US	995 9TH AVE S NAPLES, FL 33940 US

DO NOT WRITE IN THIS SPACE

01212008 No Chg-NP CR2E037 (11/05)

4. FEI Number
59-2041358
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BROWN, MARY
995 9TH AVE S
UNIT 2
NAPLES, FL 34102

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000401721
02/02/06 80055-017 61.25

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	FLYNN, NELL
STREET ADDRESS	995 9TH AVE S #5
CITY-ST-ZIP	NAPLES, FL
TITLE	SD
NAME	ASHTON, PATRICK
STREET ADDRESS	995 9TH AVE SO #6
CITY-ST-ZIP	NAPLES, FL 34102
TITLE	TD
NAME	BROWN, MARY B
STREET ADDRESS	995 9TH AVE S #3
CITY-ST-ZIP	NAPLES, FL 34102
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Mary Brown Mary Brown 1/22/06 239 430 0144
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #