2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748703

FILED Jan 25, 2009 Secretary of State

Entity Name: VANDERBILT BAY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 10420-10482 GULFSHORE DR NAPLES, FL 34108 **Current Mailing Address: New Mailing Address:** 10540 GULF SHORE DRIVE NAPLES, FL 339632041 FEI Number: 59-2004907 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: WENTZ, JOAN 10540 GULFSHORE DRIVE 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: () Delete (X) Change () Addition WHITE, JOHN WHITE, JOHN Name: Name: 155 BAYVIEW RD Address: 155 BAYVIEW RD Address: City-St-Zip: MANHASSET, NY 11030 City-St-Zip: MANHASSET, NY 11030 Title: DD () Delete Title: () Change () Addition SUHRE, LAWRENCE Name: Name: Address: 1337 WOODSAGE DR. Address: City-St-Zip: AVON, IN 46123 City-St-Zip: Title: () Delete Title: (X) Change () Addition PEARCE, G. STUART PEARCE, G. STUART Name: Name: 84 BUTTERFIELD RD Address: Address: 84 BUTTERFIELD RD City-St-Zip: CENTER HARBOR, NH 03226 City-St-Zip: CENTER HARBOR, NH 03226 () Delete Title: Title: () Change () Addition NILL, MARK Name: Name: 10660 SOUTH SHORE DR. Address: Address: City-St-Zip: SYRACUSE, IN 46567 City-St-Zip: Title: () Delete Title: () Change () Addition BOATRIGHT, JOHN Name: Name: 1950 COOPER LAKE DR SE Address: Address: City-St-Zip: SMYRNA, GA 30080 City-St-Zip: Title: () Delete Title: () Change () Addition NIEDERSTADT, TERRY Name: Name: Address: 4805 TOWN CENTRE Address: SAGINAW, MI 48604 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: STUART PEARCE P 01/25/2009