

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749932

FILED
Apr 03, 2009
Secretary of State

Entity Name: THE POSADA ASSOCIATION, INC.

Current Principal Place of Business:

4300 BELAIR LANE #1
NAPLES, FL 34103

New Principal Place of Business:

4300 BELAIR LANE
#1
NAPLES, FL 34103

Current Mailing Address:

4300 BELAIR LANE #1
NAPLES, FL 34103

New Mailing Address:

4300 BELAIR LANE
#1
NAPLES, FL 34103

FEI Number: 59-2028596

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARTER, LEE
4300 BELAIR LANE #1
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

CARTER, LEE MR.
4300 BELAIR LANE
#1
NAPLES, FL 34103 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: LEE CARTER

04/03/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DOHERTY, MARY
Address: 4300 BELAIR LN #5
City-St-Zip: NAPLES, FL 34103

Title: VD () Delete
Name: GIBSON, MARY
Address: 4300 BELAIR LN #4
City-St-Zip: NAPLES, FL 34103

Title: SD () Delete
Name: NEBEL, ELIZABETH
Address: 4300 BELAIR LN #6
City-St-Zip: NAPLES, FL 34103

Title: TD () Delete
Name: CARTER, LEE
Address: 4300 BELAIR LN #1
City-St-Zip: NAPLES, FL 34103

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BERG, DAVID E MR.
Address: 4300 BELAIR LN #12
City-St-Zip: NAPLES, FL 34103

Title: VD (X) Change () Addition
Name: GILCHRIST, GARY A MR.
Address: 4300 BELAIR LN #11
City-St-Zip: NAPLES, FL 34103

Title: SD (X) Change () Addition
Name: GIBSON, MARY MRS.
Address: 4300 BELAIR LN #4
City-St-Zip: NAPLES, FL 34103

Title: TD (X) Change () Addition
Name: CARTER, LEE MR.
Address: 4300 BELAIR LN #1
City-St-Zip: NAPLES, FL 34103

Title: D () Change (X) Addition
Name: SCANLAN, NANCY
Address: 4300 BELAIR LANE #8
City-St-Zip: NAPLES, FL 34103

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: DAVID E. BERG

PD

04/03/2009

Electronic Signature of Signing Officer or Director

Date