

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761463

FILED  
Apr 02, 2009  
Secretary of State

Entity Name: LINWOOD OF NAPLES, INC.

## Current Principal Place of Business:

2408 LINWOOD AVENUE  
7G  
NAPLES, FL 34112 US

## New Principal Place of Business:

## Current Mailing Address:

2408 LINWOOD AVENUE  
7G  
NAPLES, FL 34112 US

## New Mailing Address:

C/O COLONIAL SQUARE REALTY, INC.  
P.O. BOX 10608  
NAPLES, FL 34101 US

FEI Number: 59-2475977

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BENNETT, DEREK C  
2408 LINDWOOD AVENUE  
7G  
NAPLES, FL 34112 US

## Name and Address of New Registered Agent:

COLONIAL SQUARE REALTY, INC.  
1048 GOODLETTE ROAD  
201  
NAPLES, FL 34102 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: CLIFFORD OLSON

04/02/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PR ( ) Delete  
Name: BENNETT, DEREK C  
Address: 2408 LINDWOOD AVENUE 7G  
City-St-Zip: NAPLES, FL 34112

Title: VP ( ) Delete  
Name: BENNETT, TERESA A  
Address: 1803 DOWNING CT  
City-St-Zip: NAPLES, FL 34112 US

Title: SEC ( ) Delete  
Name: BENNETT, ANTHONY R  
Address: 1803 DOWNING CT  
City-St-Zip: NAPLES, FL 34112 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PR (X) Change ( ) Addition  
Name: CARRIGAN, MICHAEL  
Address: 6435 NAPLES BOULEVARD  
City-St-Zip: NAPLES, FL 34109

Title: VP (X) Change ( ) Addition  
Name: SHUCKHART, ALMA  
Address: 6435 NAPLES BOULEVARD  
City-St-Zip: NAPLES, FL 34109 US

Title: SEC (X) Change ( ) Addition  
Name: SPURLOCK, TERRY  
Address: 6435 NAPLES BOULEVARD  
City-St-Zip: NAPLES, FL 34109 US

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: CLIFFORD OLSON

RA

04/02/2009

Electronic Signature of Signing Officer or Director

Date