2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2009
Secretary of State

DOCUMENT# 764370

Entity Name: FRENCH QUARTER CONDOMINIUM ASSOCIATION OF NAPLES, INC.

Current Principal Place of Business:

375 8TH AVENUE SOUTH
APT D
NAPLES, FL 34102 US

New Principal Place of Business:

Current Mailing Address:

375 8TH AVENUE SOUTH
APT D
NAPLES, FL 34102 US

New Mailing Address:

FEI Number: 59-2292970 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GEFFERT, PAUL
375 8TH AVE S UNIT
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

GEFFERT, PAUL
375 8TH AVE S UNIT D
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: _____ 02/21/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: VPD ( ) Delete
Name: GEFFERT, PAUL
Address: 375 8TH AVE 5 UNIT D
City-St-Zip: NAPLES, FL 34102

Title: T ( ) Delete
Name: GEFFERT, SHARON
Address: 375 8TH AVE S, UNIT D
City-St-Zip: NAPLES, FL 34102

Title: PD ( ) Delete
Name: MCCARTHY, HARRIETT
Address: 375 8TH AVE S UNIT E
City-St-Zip: NAPLES, FL 34102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVP (X) Change ( ) Addition
Name: GEFFERT, PAUL
Address: 375 8TH AVE 5 UNIT D
City-St-Zip: NAPLES, FL 34102

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change ( ) Addition
Name: EBER, JEANNE
Address: 375 8TH AVE S UNIT A
City-St-Zip: NAPLES, FL 34102

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: PAUL GEFFERT PRES 02/21/2009
Electronic Signature of Signing Officer or Director — Date