2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# 769248

Entity Name: NAPLES SUNRISE IV, INC.

Current Principal Place of Business:

191 PENNY LANE
NAPLES, FL 34112 US

New Principal Place of Business:

Current Mailing Address:

COLLIER FINANCIAL, INC.
4985 TAMIAMI TRAIL E.
NAPLES, FL 34113 US

New Mailing Address:

FEI Number: 59-2427233 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HART, STEPHEN P
COLLIER FINANCIAL, INC
4985 EAST TAMIAMI TRAIL
NAPLES, FL 34113 US

Name and Address of New Registered Agent:

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:

Title: PD ( ) Delete
Name: JOYAL, JOYCE
Address: 191-2 PENNY LANE
City-St-Zip: NAPLES, FL 34112

Title: TD ( ) Delete
Name: REESE, PATRICIA
Address: 179-4 PENNY LANE
City-St-Zip: NAPLES, FL 34112

Title: SD ( ) Delete
Name: FOGUS, SANDRA
Address: 179-1 PENNY LANE
City-St-Zip: NAPLES, FL 34112

Title: VD ( ) Delete
Name: BERTSCHE, WALTER
Address: 197-8 PENNY LANE
City-St-Zip: NAPLES, FL 34112

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: D ( ) Change (X) Addition
Name: CONROY, LORAINE
Address: 191 PENNY LANE #7
City-St-Zip: NAPLES, FL 34112

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: JOYCE JOYAL PD 04/15/2009
Electronic Signature of Signing Officer or Director Date