

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000006059

FILED
Jul 17, 2008
Secretary of State

Entity Name: NEIGHBORHOOD AMERICA, INC.

Current Principal Place of Business:

2210 VANDERBILT BEACH RD., SUITE 1300
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

2210 VANDERBILT BEACH RD., SUITE 1300
NAPLES, FL 34109

New Mailing Address:

FEI Number: 65-0864012 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KOBZA, KIM P
2210 VANDERBILT BEACH RD., SUITE 1300
NAPLES, FL 34109 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KOBZA, KIM P
Address: 393 FLAMINGO AVENUE
City-St-Zip: NAPLES, FL 34109

Title: VSD () Delete
Name: BANKSTON, DAVID
Address: 9664 WILSHIRE LAKES BLVD
City-St-Zip: NAPLES, FL 34109

Title: D () Delete
Name: OBRIEN, MICHAEL
Address: 5261 DEEPWOOD ROAD
City-St-Zip: BLOOMFIELD HILLS, MI 48302

Title: D () Delete
Name: LUTGERT, SCOTT
Address: 4200 GULF SHORE BLVD N.
City-St-Zip: NAPLES, FL 34103

Title: D () Delete
Name: CLAUSSEN, ROBERT
Address: 6025 CARLTON LAKES BLVD
City-St-Zip: NAPLES, FL 34110

Title: D () Delete
Name: ARMALAVAGE, RICHARD
Address: 1845 TRADE CENTER WAY
City-St-Zip: NAPLES, FL 34109

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

Title: () Change () Addition
Name:
Address:
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LORI BACON

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07/17/2008

Electronic Signature of Signing Officer or Director

Date