

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2007 8:00 am
Secretary of State

04-03-2007 90018 020 ****61.25

DOCUMENT # N00000001355

1. Entity Name
**THE SEASONS AT NAPLES CAY CONDOMINIUM
ASSOCIATION, INC.**



Principal Place of Business
**81 SEAGATE DRIVE
NAPLES, FL 34103**

Mailing Address
**81 SEAGATE DRIVE
NAPLES, FL 34103**

40049281



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03212007 Chg-NP

CR2E037 (12/06)

City & State

City & State

4. FEI Number
65-1022879

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SAMOUCE, MURRELL & GAL, P.A.
5405 PARK CENTRAL COURT
NAPLES, FL 34109**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Rob Samouce
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/21/07

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME CENSITS, RICHARD ☐ Delete
STREET ADDRESS 81 SEAGATE DRIVE, #1601
CITY-ST-ZIP NAPLES, FL 34103

TITLE ~~PD~~
NAME BRENNAN, JAMES ☐ Delete
STREET ADDRESS 81 SEAGATE DRIVE, #602
CITY-ST-ZIP NAPLES, FL 34103

TITLE ~~PD~~
NAME JAFFE, MARVIN ☐ Delete
STREET ADDRESS 81 SEAGATE DRIVE, #702
CITY-ST-ZIP NAPLES, FL 34103

TITLE TD
NAME GLAH, RONALD ☐ Delete
STREET ADDRESS 81 SEAGATE DRIVE, #1003
CITY-ST-ZIP NAPLES, FL 34103

TITLE D ☒ Delete
NAME CONRAD, THOMAS
STREET ADDRESS 81 SEAGATE DRIVE, #1501
CITY-ST-ZIP NAPLES, FL 34103

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Director ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Secretary ☐ Change ☒ Addition
NAME Charlotte Bauer
STREET ADDRESS 81 Seagate Drive #603
CITY-ST-ZIP Naples, FL 34103

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/29/07 (239)262-4523