

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002235

FILED  
Apr 24, 2006  
Secretary of State

**Entity Name:** THE REGENT CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

4101 GULF SHORE BLVD. N.  
NAPLES, FL 34103

**New Principal Place of Business:**

**Current Mailing Address:**

4101 GULF SHORE BLVD. N.  
NAPLES, FL 34103

**New Mailing Address:**

**FEI Number:** 65-1095319

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

VALOUSKY, DURENDA L  
4101 GULF SHORE BLVD. N.  
NAPLES, FL 34103 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: P ( ) Delete  
Name: CLIFFORD, ROBERT  
Address: 4101 GULF SHORE BLVD N. #4S  
City-St-Zip: NAPLES, FL 34103 US

Title: VP ( ) Delete  
Name: BAKER, JAY  
Address: 4101 GULF SHORE BLVD. N. #PH\_5  
City-St-Zip: NAPLES, FL 34103 US

Title: D ( ) Delete  
Name: FREY, EUGENE  
Address: 4101 GULF SHORE BLVD. N. #PH-2  
City-St-Zip: NAPLES, FL 34103 US

Title: ST ( ) Delete  
Name: MONGIELLO, JAMES  
Address: 4101 GULF SHORE BLVD. N. #14S  
City-St-Zip: NAPLES, FL 34103 US

Title: D ( ) Delete  
Name: SCOTT, JAMES  
Address: 4101 GULF SHORE BLVD N #16S  
City-St-Zip: NAPLES, FL 34103

**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 (X) Change ( ) Addition  
Name: INMAN, GORDON  
Address: 4101 GULF SHORE BLVD N #18S  
City-St-Zip: NAPLES, FL 34103

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT CLIFFORD

P

04/24/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date