

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90439 033 ****61.25

DOCUMENT # N00000004050 1. Entity Name ISLA VISTA AT GREY OAKS NEIGHBORHOOD ASSOCIATION, INC.					
Principal Place of Business C/O RESORT MANAGEMENT 2685 HORSESHOE DR. S. #215 NAPLES, FL 34104			Mailing Address C/O RESORT MANAGEMENT 2685 HORSESHOE DR. S. #215 NAPLES, FL 34104		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-3653785	
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	
WEBER, RON 1012 ISLA VISTA LANE NAPLES, FL 34105				Name <u>Steve Messina</u> Street Address (P.O. Box Number is Not Acceptable) <u>2029 Isle Vista Lane</u> City <u>Naples</u> FL Zip Code <u>34105</u>	
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 <u>[Signature]</u> (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2006		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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP WEBER, RON 2012 ISLA VISTA LANE NAPLES, FL 34105	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Leo Montanaro 2033 Isla Vista Lane Naples, FL 34105
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T TAYLOR, HOWARD 2045 ISLA VISTA LANE NAPLES, FL 34105	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS ENGELKE, BOB 2064 ISLA VISTA LANE NAPLES, FL 34105	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MESSANA, STEVE 2029 ISLE VISTA LANE NAPLES, FL 34105	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RUTER, HARRY 2004 ISLA VISTA LANE NAPLES, FL 34105	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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: <u>[Signature]</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
				Date _____ Daytime Phone # _____	