

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005586

FILED
Apr 24, 2009
Secretary of State

Entity Name: VILLA FLORENZA AT THE VINEYARDS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O RESORT MANAGEMENT
2685 HORSESHOE DRIVE, SUITE 215
NAPLES, FL 34104

New Principal Place of Business:

C/O RESORT MANAGEMENT
2685 HORSESHOE DRIVE SOUTH STE 215
NAPLES, FL 34104

Current Mailing Address:

C/O RESORT MANAGEMENT
2685 HORSESHOE DRIVE, SUITE 215
NAPLES, FL 34104

New Mailing Address:

C/O RESORT MANAGEMENT
2685 HORSESHOE DRIVE SOUTH STE 215
NAPLES, FL 34104

FEI Number: 59-3675476

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIES, CHRISTOPHER N ESQ
2375 TAMiami TRAIL NORTH
SUITE 308
34103, FL 34119 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: STEWART, ROBERT
Address: 880 VILLA FLORENZA DR
City-St-Zip: NAPLES, FL 34119

Title: T () Delete
Name: ALBIN, JEFFERY
Address: 910 VILLA FLORENZA DRIVE
City-St-Zip: NAPLES, FL 34119

Title: VP () Delete
Name: HARRIS, LAWRENCE
Address: 840 VILLA FLORENZA DRIVE
City-St-Zip: NAPLES, FL 34119

Title: D () Delete
Name: GAZZILLO, DENNIS
Address: 892 VILLA FLORENZA DRIVE
City-St-Zip: NAPLES, FL 34119

Title: S () Delete
Name: SHAFER, SAMUEL
Address: 805 VILLA FLORENZA DRIVE
City-St-Zip: NAPLES, FL 34119

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: STEWART, ROBERT
Address: 880 VILLA FLORENZA DR
City-St-Zip: NAPLES, FL 34119

Title: T (X) Change () Addition
Name: KUTLER, STEPHEN
Address: 808 VILLA FLORENZA DRIVE
City-St-Zip: NAPLES, FL 34119

Title: S (X) Change () Addition
Name: SHAFER, SAMUEL
Address: 805 VILLA FLORENZA DRIVE
City-St-Zip: NAPLES, FL 34119

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

Title: P (X) Change () Addition
Name: MCKIERNAN, THOMAS
Address: 820 VILLA FLORENZA DRIVE
City-St-Zip: NAPLES, FL 34119

Title: D () Change (X) Addition
Name: HIGGINS, KENT
Address: 848 VILLA FLORENZA DRIVE
City-St-Zip: NAPLES, FL 34119

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: THOMAS MCKIERNAN

P

04/24/2009

Electronic Signature of Signing Officer or Director

Date