

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006715

FILED
Mar 30, 2010
Secretary of State

Entity Name: SARATOGA AT LELY RESORT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

FEI Number: 59-3675253

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARDON, HAROLD
8188 SARASOTA DR
SUITE 703
NAPLES, FL 34113 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: T
Name: BARDON, HAL
Address: 8188-703 SARATOGA DRIVE
City-St-Zip: NAPLES, FL 34113 US

Title: D
Name: JENSEN, JOHN
Address: 8188-704 SARATOGA DRIVE
City-St-Zip: NAPLES, FL 34113

Title: D
Name: GONDEK, GARY
Address: 8208 203 SARATOGA DRIVE
City-St-Zip: NAPLES, FL 34113

Title: D
Name: FARNELL, GEORGE
Address: 8173-1103 SARATOGA DRIVE
City-St-Zip: NAPLES, FL 34113

Title: P
Name: KELLY, BOBBY
Address: 8144-1103 SARATOGA DRIVE
City-St-Zip: NAPLES, FL 34113

I hereby 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 all other like empowered.

SIGNATURE: HAROLD BARDON

T

03/30/2010

Electronic Signature of Signing Officer or Director

Date