

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000514

FILED  
Apr 12, 2010  
Secretary of State

**Entity Name:** THE DUNES OF NAPLES I CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

300 DUNES BLVD.  
NAPLES, FL 34110

**New Principal Place of Business:**

**Current Mailing Address:**

3050 N. HORSESHOE DR.  
#275  
NAPLES, FL 34104

**New Mailing Address:**

**FEI Number:** 59-3696081

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VANDALL, BONITA D  
3050 N. HORSESHOE DRIVE #275  
NAPLES, FL 34104 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: DP  
Name: RIGONI, ROBERT  
Address: 300 DUNES BLVD. #PH6  
City-St-Zip: NAPLES, FL 34108

Title: DVP  
Name: MARGUERITE, CARL  
Address: 300 DUNES BLVD #205  
City-St-Zip: NAPLES, FL 34110

Title: S  
Name: WEILAND, MIKE  
Address: 300 DUNES BLVD #PH7  
City-St-Zip: NAPLES, FL 34110

Title: DT  
Name: KNAPP, TONY  
Address: 300 DUNES BLVD #403  
City-St-Zip: NAPLES, FL 34110

Title: D  
Name: NEELY, JOHN  
Address: 300 DUNES #1102  
City-St-Zip: NAPLES, FL 34110

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: ROBERT RIGONI

P

04/12/2010

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

\_\_\_\_\_  
Date