

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004605

FILED
Feb 20, 2012
Secretary of State

Entity Name: VANDERBILT GALLERIA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1048 GOODLETTE ROAD
SUITE 201
NAPLES, FL 34102

New Principal Place of Business:

720 GOODLETTE ROAD
5TH FLOOR
NAPLES, FL 34102

Current Mailing Address:

C/O COLONIAL SQUARE REALTY, INC.
P.O. BOX 10608
NAPLES, FL 34101

New Mailing Address:

C/O COLONIAL SQUARE MANAGEMENT GROUP
P.O. BOX 10608
NAPLES, FL 34101

FEI Number: 65-1133114

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARLICK, THOMAS B ESQ.
9115 CORSEA DEL FONTANA WAY
SUITE 100
NAPLES, FL 34109 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: D
Name: PASTOOR, GEORGE
Address: 4531 PRESCOTT LANE
City-St-Zip: NAPLES, FL 34119

Title: D
Name: MCNAMARA, LISA
Address: 9140 CORSEA DEL FONTANA WAY
City-St-Zip: NAPLES, FL 34109

Title: VP
Name: SWOPE, RICK
Address: 8955 FONTANA DEL SOL WAY
City-St-Zip: NAPLES, FL 34109

Title: PRES
Name: GARLICK, THOMAS B ESQ.
Address: 9115 CORSEA DEL FONTANA WAY, STE 100
City-St-Zip: NAPLES, FL 34109

Title: S/T
Name: MCDONALD, LARRY
Address: 9120 CORSEA DEL FONTANA WAY
City-St-Zip: NAPLES, FL 34109

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: THOMAS GARLICK

PRES

02/20/2012

Electronic Signature of Signing Officer or Director

Date