2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 14, 2006
Secretary of State

DOCUMENT# N01000008225

Entity Name: TRIESTE AT VASARI VILLAGE ASSOCIATION, INC.

Current Principal Place of Business:

8430 ENTERPRISE CIRCLE, SUITE 100
BRADENTON, FL 342024108

New Principal Place of Business:

Current Mailing Address:

8430 ENTERPRISE CIRCLE, SUITE 100
BRADENTON, FL 342024108

New Mailing Address:

FEI Number: 02-0553572 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SPENCER, MARC I
877 EXECUTIVE CENTER DRIVE W., SUITE 205
ST. PETERSBURG, FL 337022472 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 ( ) Delete
Name: SMITH, ALAN B
Address: 2950 IMMOKALEE RD, STE 2
City-St-Zip: NAPLES, FL 34110

Title: D ( ) Delete
Name: FICHTER, THOMAS P JR
Address: 2950 IMMOKALEE RD, STE 2
City-St-Zip: NAPLES, FL 34110

Title: D ( ) Delete
Name: WHITMORE, JAMES A
Address: 2950 IMMOKALEE RD, STE 2
City-St-Zip: NAPLES, FL 34110

Title: AS ( ) Delete
Name: SPENCER, MARC I
Address: 877 EXECUTIVE CENTER DR. W., STE 205
City-St-Zip: ST. PETERSBURG, FL 337022472

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVP (X) Change ( ) Addition
Name: SMITH, ALAN B
Address: 2950 IMMOKALEE RD, STE 2
City-St-Zip: NAPLES, FL 34110

Title: DVP (X) Change ( ) Addition
Name: FICHTER, THOMAS P JR
Address: 2950 IMMOKALEE RD, STE 2
City-St-Zip: NAPLES, FL 34110

Title: DP (X) Change ( ) Addition
Name: WHITMORE, JAMES A
Address: 2950 IMMOKALEE RD, STE 2
City-St-Zip: NAPLES, FL 34110

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

Title: VTST ( ) Change (X) Addition
Name: COHEN, ANN S
Address: 877 EXECUTIVE CENTER DR. W., STE 205
City-St-Zip: ST. PETERSBURG, FL 33702

I hereby certify that the information supplied with this filing does not qualify for the 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: MARC I. SPENCER AS 07/14/2006

Electronic Signature of Signing Officer or Director — Date