2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED May 15, 2008 8:00 am Secretary of State

DOCUMENT # N02000008760			05	5-15-2008 9	90020 007 ****	61.25	
MARBELLA AT SPANISH WELLS HOMEOWNERS ASSOCIATION, INC.							
		_ : :	40	10235			
2. Principal Place of Business - No P.O. Box # 3. Mailing Address 10 Kramer / Tried Mat. Group. 3050 N. Hors		loiseshoe					
Suito Act # atc	Suite, Apt. #, etc.		04142008 C	ng-NP	CR2E037 (12/06	5)	
3050 N. Horseshoe Dr. 275 City & State	City & State		4. FEI Number	_		Applied For	
Nuples FL. Zip Country	Naples Zip	Country	04-275541	8	ż p ur	Not Applicable	
	34104	USA	5. Certificate of St	atus Desired	□ \$8.75 . Fee Requ		
Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent				
FAMILY PROPERTY SERVICES, INC		Name Kra	er Triad 1	Mgt. G	roup. Ll	_C	
1330 RAIL HEAD BLVD		365	dress (P.O. Box Number is I ル、 H'ロ Sesh	Not Acceptable	e) Suite# 2	75	
NAPLES, FL 34110			•				
		City Na	105		FL Zip C	ode 104	
The above named entity submits this statement for the obligations of registered agent.	e purpose of changing it	s registered office of	egistered agent, or both, in	the State of Flo	orida. I am familiar w	th, and accept	
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			required whereinstating)		DATE		
Signature, lyited or printed name of registered agent and t	title if applicable. (NO	TE: Registered Agent signa		. 8/27/GHQ.	DATE	in the second	
	9. Election Ca		\$5.00 May Be Added to Fees	Flor	DATE lake check payable the Department of	State	
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mereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under coath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

E OF SIGNING OFFICER OR DIRECTOR