2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# N03000005468

Entity Name: PARADISE WOODS ASSOCIATION OF HOMEOWNERS, INC.

Current Principal Place of Business:

766 17TH AVENUE SOUTH
NAPLES, FL 34102

New Principal Place of Business:

2348 PINE STREET
NAPLES, FL 34112

Current Mailing Address:

766 17TH AVENUE SOUTH
NAPLES, FL 34102

New Mailing Address:

2348 PINE STREET
NAPLES, FL 34112

FEI Number: 58-2674962 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VOLPE, MICHAEL E ESQ
ROBINS, KAPLAN, MILLER & CIRESI, LLP
711 FIFTH AVENUE SOUTH, SUITE 201
NAPLES, FL 34119 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: VPD ( ) Delete
Name: CARBON, NIKOLAUS R
Address: 10066 HIDDEN PINES LANE
City-St-Zip: BONITA SPRINGS, FL 34135

Title: PD ( ) Delete
Name: THOMAS, KEVIN J
Address: 766 17TH AVENUE SOUTH
City-St-Zip: NAPLES, FL 34102

Title: STD ( ) Delete
Name: HITE, JENNIFER
Address: 766 17TH AVENUE SOUTH
City-St-Zip: NAPLES, FL 34102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change ( ) Addition
Name: THOMAS, KEVIN J
Address: PO BOX 9260
City-St-Zip: NAPLES, FL 34101

Title: STD (X) Change ( ) Addition
Name: HITE, JENNIFER
Address: 2348 PINE STREET
City-St-Zip: NAPLES, FL 34112

I hereby certify that the information supplied with this filing does not qualify 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: KEVIN THOMAS PD 04/30/2009

Electronic Signature of Signing Officer or Director — Date