

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005627

FILED  
Mar 15, 2010  
Secretary of State

**Entity Name:** CARAVELLA AT PALMIRA NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

CARAVALLA  
BONITA SPRINGS, FL 34135 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O KEB MANAGEMENT  
6017 PINE RIDGE ROAD #262  
NAPLES, FL 34119 US

**New Mailing Address:**

**FEI Number:** 01-0789544      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

BLOOM, KENNETH  
28121 PALMIRA BLVD  
BONITA SPRINGS, FL 34135 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: P  
Name: BAUM, JERRY  
Address: 14180 GIUSTINO WAY  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: T  
Name: SUTTA, DIANE  
Address: 23619 VIA CARINO LANE  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: S  
Name: DONOHUE, LINDA  
Address: 28681 SAN GALGANO WAY  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D  
Name: DALY, KEVIN  
Address: 28632 SAN GALGANO WAY  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D  
Name: LEFKOWITZ, GARY  
Address: 28646 SAN GALGANO WAY  
City-St-Zip: BONITA SPRINGS, FL 34135

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: JERRY BAUM

P

03/15/2010

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

\_\_\_\_\_  
Date