2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2009
Secretary of State

DOCUMENT# N03000006294

Entity Name: VILLAGES AT STELLA MARIS CONDOMINIUM ASSOC 2300, INC.

Current Principal Place of Business:

285 CAYS DRIVE
NAPLES, FL 34112 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 110156
NAPLES, FL 34108 US

New Mailing Address:

FEI Number: 65-0865523 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WHITE, WILLIAM D CAW
2310 DELLA DRIVE
NAPLES, FL 34117 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: BRIDGER, RALPH
Address: 285 CAYS DRIVE, #2301
City-St-Zip: NAPLES, FL 34112 US

Title: DT ( ) Delete
Name: MARCOPLOS, CHRISTIANNE
Address: 285 CAYS DRIVE, #2305
City-St-Zip: NAPLES, FL 34112 US

Title: DVP ( ) Delete
Name: PRONKE, PETER
Address: 1207 CRYSTAL MOUNTAIN DRIVE
City-St-Zip: THOMPSONVILLE, MI 49683 US

Title: SM ( ) Delete
Name: WHITE, WILLIAM D
Address: 2310 DELLA DRIVE
City-St-Zip: NAPLES, FL 34117 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DVPS (X) Change ( ) Addition
Name: RIGGOTT, NANCY
Address: 61 TEN ACRE RD
City-St-Zip: MIDDLETOWN, CT 06445 US

Title: ASM (X) Change ( ) Addition
Name: WHITE, WILLIAM D
Address: 2310 DELLA DRIVE
City-St-Zip: NAPLES, FL 34117 US

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: WILLIAM D. WHITE ASM 04/16/2009

Electronic Signature of Signing Officer or Director — Date