

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000011114

FILED
Apr 17, 2009
Secretary of State

Entity Name: REFLECTION LAKES AT NAPLES I CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O R&P PROPERTY MANAGEMENT
265 AIRPORT RD S
NAPLES, FL 34104 US

New Principal Place of Business:

Current Mailing Address:

C/O R&P PROPERTY MANAGEMENT
265 AIRPORT RD S
NAPLES, FL 34104 US

New Mailing Address:

FEI Number: 61-1408521

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

R&P PROPERTY MANAGEMENT
265 AIRPORT RD S
NAPLES, FL 34104 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: CHANDLER, JAMES
Address: 14160 WINCHESTER CT #1801
City-St-Zip: NAPLES, FL 34114 US

Title: STD () Delete
Name: CHORLTON, DEREK
Address: 14120 WINCHESTER COURT # 1402
City-St-Zip: NAPLES, FL 34114 US

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: STD (X) Change () Addition
Name: MCIVER, TINA
Address: 14090 WINCHESTER COURT # 1101
City-St-Zip: NAPLES, FL 34114 US

Title: D () Change (X) Addition
Name: COLLINS, STEVE
Address: 14155 WINCHESTER CT. #303
City-St-Zip: NAPLES, FL 34114 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: JAMES W. CHANDLER

PD

04/17/2009

Electronic Signature of Signing Officer or Director

Date