

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000400

FILED  
Apr 27, 2010  
Secretary of State

**Entity Name:** PROVIDENCE VILLAGE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O THE WARNER CORP  
886 110TH AVE N SUITE 7  
NAPLES, FL 34108

**New Principal Place of Business:**

C/O COMPASS GROUP  
3701 NORTH TAMiami TRAIL  
NAPLES, FL 34103

**Current Mailing Address:**

C/O THE WARNER CORP  
886 110TH AVE N SUITE 7  
NAPLES, FL 34108

**New Mailing Address:**

C/O COMPASS GROUP  
3701 NORTH TAMiami TRAIL  
NAPLES, FL 34103

**FEI Number:** 58-2681118

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WARNER, BRYAN J  
886 110TH AVE N SUITE 7  
NAPLES, FL 34108 US

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

COMPASS GROUP  
3701 NORTH TAMiami TRAIL  
NAPLES, FL 34103 US

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: COMPASS GROUP

04/27/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: RIEMAN, ROBERT  
Address: 4970 SHAKER HEIGHTS COURT  
City-St-Zip: NAPLES, FL 34112

Title: VP  
Name: NOVAK, RICHARD  
Address: 4970 SHAKER HEIGHTS COURT  
City-St-Zip: NAPLES, FL 34112

Title: S  
Name: MATHEWS, DEFOREST  
Address: 4956 SHAKER HEIGHTS COURT  
City-St-Zip: NAPLES, FL 34113

Title: T  
Name: SMITH, BUD  
Address: 4979 SHAKER HEIGHTS COURT  
City-St-Zip: NAPLES, FL 34112

Title: D  
Name: DORIAN, TOM  
Address: 4959 SHAKER HEIGHTS COURT  
City-St-Zip: NAPLES, FL 34112

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: ROBERT RIEMAN

P

04/27/2010

Electronic Signature of Signing Officer or Director

Date