2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2009
Secretary of State

DOCUMENT# N04000001080

Entity Name: NAPLES LAKES LADIES NINE HOLE GOLF ASSOCIATION, INC.

Current Principal Place of Business:

4784 INVERNESS CLUB DRIVE
NAPLES, FL 34112

New Principal Place of Business:

Current Mailing Address:

4784 INVERNESS CLUB DRIVE
NAPLES, FL 34112

New Mailing Address:

FEI Number: 43-2042668 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MOLITOR, LINDA L
4995 CERROMAR DRIVE
NAPLES, FL 34112 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 ( ) Delete
Name: MOLITOR, LINDA L
Address: 4995 CARROMAR DRIVE
City-St-Zip: NAPLES, FL 34112

Title: VP ( ) Delete
Name: ZAJAC, CYNTHIA A
Address: 4800 SHINNECOOK HILL CT
City-St-Zip: NAPLES, FL 34112

Title: VP ( ) Delete
Name: COUZENS, SUSAN
Address: 5036 CASTLEROCK WAY
City-St-Zip: NAPLES, FL 34112

Title: S ( ) Delete
Name: GALE, GERALDINE
Address: 4655 WINGEDFOOT CT
City-St-Zip: NAPLES, FL 34112

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: MOLITOR, LINDA L
Address: 4995 CERROMAR DRIVE
City-St-Zip: NAPLES, FL 34112

Title: VP (X) Change ( ) Addition
Name: ZAJAC, CYNTHIA A
Address: 4800 SHINNECOCK HILL CT
City-St-Zip: NAPLES, FL 34112

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

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

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: CYNTHIA A. ZAJAC T 01/15/2009

Electronic Signature of Signing Officer or Director — Date