

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002243

FILED
Apr 02, 2009
Secretary of State

Entity Name: VANDERBILT PLACE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

ADVANCED PROPERTY MGMT.
1035 COLLIER CENTERWAY #7
NAPLES, FL 34110

New Principal Place of Business:

1035 COLLIER CENTER WAY
SUITE 7
NAPLES, FL 34110

Current Mailing Address:

ADVANCED PROPERTY MGMT.
1035 COLLIER CENTERWAY #7
NAPLES, FL 34110

New Mailing Address:

1035 COLLIER CENTER WAY
SUITE 7
NAPLES, FL 34110

FEI Number: 20-1481616

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, SUSAN
ADVANCED PROPERTY MGMT.
1035 COLLIER CENTER WAY #7
NAPLES, FL 34110 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: D () Delete
Name: PUPPOLO, JOSE
Address: 14870 PLEASANT BAY LANE #1107
City-St-Zip: NAPLES, FL 34119

Title: SD () Delete
Name: CALLIS, CRAIG
Address: 14890 PLEASANT BAY #3206
City-St-Zip: NAPLES, FL 34119

Title: PD () Delete
Name: OOSTERBAAN, ADAM
Address: 14890 PLEASANT BAY LANE #203
City-St-Zip: NAPLES, FL 34119

Title: TD (X) Delete
Name: STORWICK, TONY
Address: 14890 PLEASANT BAY LANE #3104
City-St-Zip: NAPLES, FL 34119

Title: VD (X) Delete
Name: MARSHALL, WENDY
Address: 14885 PLEASANT BAY LANE #4104
City-St-Zip: NAPLES, FL 34119

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT (X) Change () Addition
Name: STORWICK, TONY
Address: 14890 PLEASANT BAY LANE #3104
City-St-Zip: NAPLES, FL 34119

Title: DVPS (X) Change () Addition
Name: MARSHALL, WENDY
Address: 14885 PLEASANT BAY LANE #4104
City-St-Zip: NAPLES, FL 34119

Title: DP (X) Change () Addition
Name: OOSTERBAAN, ADAM
Address: 14890 PLEASANT BAY LANE #3202
City-St-Zip: NAPLES, FL 34119

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: ADAM OOSTERBAAN

DP

04/02/2009

Electronic Signature of Signing Officer or Director

Date