

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009111

FILED  
Mar 23, 2012  
Secretary of State

**Entity Name:** RAPALLO VILLAS TWO ASSOCIATION, INC.

**Current Principal Place of Business:**

8551 VIA RAPALLO  
ESTERO, FL 33928

**New Principal Place of Business:**

**Current Mailing Address:**

8551 VIA RAPALLO  
ESTERO, FL 33928

**New Mailing Address:**

**FEI Number:** 20-2180517

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GOEDE, JOHN C  
9915 TAMiami TRAIL N., SUITE #1  
NAPLES, FL 34108 US

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

ALLEN, TODD C  
8950 FONTANA DEL SOL WAY, SUITE #100  
NAPLES, FL 34109 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: SHERRY A. SLATER, CAM, GM

03/23/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: TUCKERMAN, TOM  
Address: 8551 VIA RAPALLO DR.  
City-St-Zip: ESTERO, FL 33928

Title: VP  
Name: LAURILA, DAN  
Address: 8551 VIA RAPALLO DR.  
City-St-Zip: ESTERO, FL 33928

Title: S/T  
Name: ZAWACKI, KAREN  
Address: 8551 VIA RAPALLO DR.  
City-St-Zip: ESTERO, FL 33928

Title: AS  
Name: SLATER, SHERRY CAM  
Address: 8551 VIA RAPALLO DR.  
City-St-Zip: ESTERO, FL 33928

Title: BD.  
Name: MONDAY, JOHN  
Address: 8551 VIA RAPALLO DR.  
City-St-Zip: ESTERO, FL 33928

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: SHERRY A. SLATER, CAM

GM

03/23/2012

Electronic Signature of Signing Officer or Director

Date