

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009594

FILED  
Mar 08, 2010  
Secretary of State

**Entity Name:** NAPOLI LUXURY CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1850 FLORIDA CLUB DR  
NAPLES, FL 34112

**New Principal Place of Business:**

**Current Mailing Address:**

396 ALHAMBRA CIRCLE  
SUITE 230  
MIAMI, FL 33134

**New Mailing Address:**

8200 NW 33RD STREET  
SUITE 300  
MIAMI, FL 33122

**FEI Number:** 20-1760169

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JOHN C. GOEDE P.A.  
9915 TAMiami TRAIL NORTH STE 1  
NAPLES, FL 34108 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  
Name: STEINGART, EVAN  
Address: 1850 FLORIDA CLUB DR  
City-St-Zip: NAPLES, FL 34112

Title: T  
Name: REGGO, RICH  
Address: 1850 FLORIDA CLUB DR  
City-St-Zip: NAPLES, FL 34112

Title: P  
Name: BURY, RONALD  
Address: 1850 FLORIDA CLUB DR  
City-St-Zip: NAPLES, FL 34112

Title: S  
Name: KING, DEBRA  
Address: 1850 FLORIDA CLUB DR  
City-St-Zip: NAPLES, FL 34112

Title: D  
Name: ROHRBACH, JAMES  
Address: 1850 FLORIDA CLUB DR  
City-St-Zip: NAPLES, FL 34112

Title: D  
Name: VALENTINO, JOHN  
Address: 1850 FLORIDA CLUB DR  
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: DEBRA KING

S

03/08/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date