

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04029

FILED
Apr 23, 2007
Secretary of State

Entity Name: VANDERBILT SURF COLONY, A CONDOMINIUM, SECTION III, ASSOCIATION, INC.

Current Principal Place of Business:

17 BLUEBILL AVENUE
NAPLES, FL 34108 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 10579
NAPLES, FL 34101 US

New Mailing Address:

COLLIER FINANCIAL, INC.
4985 TAMIAMI TRAIL E.
NAPLES, FL 34113 US

FEI Number: 59-2495284

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, STEPHEN P
COLLIER FINANCIAL INC.
4985 E TAMIAMI TRAIL
NAPLES, FL 34113 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: SD () Delete
Name: HENRY, JACK
Address: 17 BLUEBILL AVE
City-St-Zip: NAPLES, FL 34108

Title: TD () Delete
Name: KANAK, WILBUR
Address: 607 S. HARVARD
City-St-Zip: ARLINGTON HEIGHTS, IL 60005

Title: PD () Delete
Name: ADELL, HARRY
Address: 17 BLUEBILL AVE., #406
City-St-Zip: NAPLES, FL 34108

Title: VD () Delete
Name: LINNERUD, HAROLD
Address: 17 BLUEBILL AVE #106
City-St-Zip: NAPLES, FL 34108

Title: D () Delete
Name: SPAHR, GARY
Address: 17 BLUEBILL AVE #501
City-St-Zip: NAPLES, FL 34108

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPD (X) Change () Addition
Name: KANAK, WILBUR
Address: 607 S. HARVARD
City-St-Zip: ARLINGTON HEIGHTS, IL 60005

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

Title: TD (X) Change () Addition
Name: LINNERUD, HAROLD
Address: 17 BLUEBILL AVE #106
City-St-Zip: NAPLES, FL 34108

Title: VD (X) Change () Addition
Name: SPAHR, GARY
Address: 17 BLUEBILL AVE #501
City-St-Zip: NAPLES, FL 34108

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: HARRY ADELL

PD

04/23/2007

Electronic Signature of Signing Officer or Director

Date