## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000002986

FILED Apr 28, 2009 Secretary of State

Entity Name: AVIANO AT NAPLES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** CARDINAL MGMT GROUP OF SOUTH FL. 5067 TAMIAMI TRAIL EAST NAPLES, FL 34113 **New Mailing Address: Current Mailing Address:** CARDINAL MGMT GROUP OF SOUTH FL. 5067 TAMIAMI TRAIL EAST NAPLES, FL 34113 FEI Number: 20-3860586 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CARDINAL MANAGEMENT GROUP 5067 TAMIAMI TRAIL EAST NAPLES, FL 34113 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition MAYOTTE, BRIAN Name: Name: 12785 AVIANO DRIVE Address: Address: City-St-Zip: NAPLES, FL 34105 US City-St-Zip: Title: Title: (X) Change ( ) Addition () Delete PRETE, JOHN Name: ALBERT, TJ Name: Address: 12835 CARRINGTON CIRCLE STE 202 Address: 12656 BISCAYNE CT City-St-Zip: NAPLES, FL 34105 US City-St-Zip: NAPLES, FL 34105 US Title: () Delete Title: (X) Change ( ) Addition GARLICH, BONNIE GOERLICH, BONNIE Name: Name: 12819 CARRINGTON CIRCLE STE 202 12819 CARRINGTON CIRCLE STE 202 Address: Address: City-St-Zip: NAPLES, FL 34105 US City-St-Zip: NAPLES, FL 34105 US Title: ( ) Delete Title: (X) Change ( ) Addition Name: KORSEN, WILLIAM Name: KORSON, WILLIAM 12870 CARRINGTON CIRCLE STE 101 12870 CARRINGTON CIRCLE STE 101 Address: Address: City-St-Zip: NAPLES, FL 34105 City-St-Zip: NAPLES, FL 34105 Title: () Delete Title: (X) Change ( ) Addition ALBERT, TJ PRETE, JOHN Name: Name: 12656 BISCAYNE CT 12835 CARRINGTON CIRCLE #202 Address: Address: City-St-Zip: NAPLES, FL 34105 City-St-Zip: NAPLES, FL 34105 Title: () Delete Title: ( ) Change (X) Addition CONSTANTINO, DOLORES Name: Name: Address: Address: 12836 CARRINGTON CIRCLE #103 NAPLES, FL 34105 City-St-Zip: 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: BRIAN MAYOTTE P 04/28/2009