

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002986

FILED
May 04, 2010
Secretary of State

Entity Name: AVIANO AT NAPLES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O GULF BREEZE MANAGEMENT SERVICES, LLC
8910 TERRENCE COURT, STE 200
NAPLES, FL 34135 US

New Principal Place of Business:

Current Mailing Address:

C/O GULF BREEZE MANAGEMENT SERVICES, LLC
8910 TERRENCE COURT, STE 200
NAPLES, FL 34135 US

New Mailing Address:

FEI Number: 20-3860586 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WEIDNER, RALPH L CAM
C/O GULF BREEZE MANAGEMENT SERVICES, LLC
8910 TERRENCE COURT, STE 200
BONITA SPRINGS, FL 34135 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: MAYOTTE, BRIAN
Address: 12785 AVIANO DRIVE
City-St-Zip: NAPLES, FL 34105 US

Title: VD
Name: ALBERT, THOMAS
Address: 12656 BISCAYNE CT
City-St-Zip: NAPLES, FL 34105 US

Title: D
Name: GOERLICH, BONNIE
Address: 12819 CARRINGTON CIRCLE STE 202
City-St-Zip: NAPLES, FL 34105 US

Title: SD
Name: KORSON, WILLIAM
Address: 12870 CARRINGTON CIRCLE STE 101
City-St-Zip: NAPLES, FL 34105

Title: TD
Name: PRETE, JOHN
Address: 12835 CARRINGTON CIRCLE #202
City-St-Zip: NAPLES, FL 34105

Title: D
Name: CONSTANTINO, DOLORES
Address: 12836 CARRINGTON CIRCLE #103
City-St-Zip: NAPLES, FL 34105

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: BRIAN MAYOTTE

PRES

05/04/2010

Electronic Signature of Signing Officer or Director

Date