

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004641

FILED
Mar 03, 2011
Secretary of State

Entity Name: NAPLES BAY RESORT WEST PARCEL MASTER PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

3530 KRAFT ROAD
SUITE 204
NAPLES, FL 34105

New Principal Place of Business:

Current Mailing Address:

1500 5TH AVENUE S
NAPLES, FL 34102

New Mailing Address:

FEI Number: 20-4759288

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BECKER & POLIAKOFF, P.A.
999 VANDERBILT BEACH ROAD
STE 501
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: P
Name: MACIVOR, THOMAS
Address: 3530 KRAFT ROAD, SUITE 204
City-St-Zip: NAPLES, FL 34105

Title: V
Name: ZAND, KAMBIZ
Address: 995 SANDPIPER STREET #204
City-St-Zip: NAPLES, FL 34102

Title: T
Name: DELGADO, FRANK
Address: 3530 KRAFT ROAD, SUITE 204
City-St-Zip: NAPLES, FL 34105

Title: S
Name: HENDRICKS, BRIAN
Address: 3530 KRAFT ROAD STE 204
City-St-Zip: NAPLES, FL 34105

Title: D
Name: CRIST, PETER
Address: 306 D GRANT
City-St-Zip: HINSDALE, IL 60521

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: THOMAS MACIVOR

P

03/03/2011

Electronic Signature of Signing Officer or Director

Date