

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006564

FILED  
Apr 15, 2009  
Secretary of State

Entity Name: LITTLE HARBOR AT PUNTA GORDA ISLES, INC.

## Current Principal Place of Business:

2421 SHEVE ST.  
STE 115  
PUNTA GORDA, FL 33950

## New Principal Place of Business:

## Current Mailing Address:

2421 SHEVE ST.  
STE 115  
PUNTA GORDA, FL 33950

## New Mailing Address:

FEI Number: 20-5875444

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BENNETT, DOROTHY M  
2421 SHREVE ST. STE 11 5  
PUNTA GORDA, FL 33950 US

## Name and Address of New Registered Agent:

BENNETT, DOROTHY M  
2421 SHREVE ST. STE 115  
PUNTA GORDA, FL 33950 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: DOROTHY M. BENNETT

04/15/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SELZ, BERNARD  
Address: 3228 PUPLE MARTIN UNIT 116  
City-St-Zip: PUNTA GORDA, FL 33950

Title: DS ( ) Delete  
Name: MORRISON, PAT  
Address: 1857 TRYBORNE CIRCLE  
City-St-Zip: COMMERCE TWP, MI 48390

Title: DT ( ) Delete  
Name: PRESENTATO, MARK  
Address: 152 PLACITAS TRLS RD.  
City-St-Zip: PLACITAS, NM 87043

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: VPD ( ) Change (X) Addition  
Name: MORRISON, PAT  
Address: 1857 TREYBORNE CIRCLE  
City-St-Zip: COMMERCE TWP, MI 48390

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: DOROTHY M. BENNETT

CAM

04/15/2009

Electronic Signature of Signing Officer or Director

Date