2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011707

FILED Mar 10, 2009 Secretary of State

Entity Name: THE RESERVE AT NAPLES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1140 RESERVE WAY NAPLES, FL 34105

Current Mailing Address: New Mailing Address:

1140 RESERVE WAY NAPLES, FL 34105

FEI Number: 90-0266514 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GOEDE, JOHN C JOHN C. GOEDE, PA 9915 TAMIAMI TRAIL N - STE. 1 NAPLES, FL 34108 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:

- Flateria Circular (Davidson I Arrel

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 BOLRICK, ANDREW
 Name:
 BISHOP, PATRICK

 Address:
 2555 ENTERPRISE RD 9-I
 Address:
 1130 RESERVE WAY #204

 City-St-Zip:
 CLEARWATER, FL 33763
 City-St-Zip:
 NAPLES, FL 34105

 Title:
 STD
 () Delete
 Title:
 TRD
 (X) Change () Addition

 Name:
 ANDERSON, ERICA
 Name:
 HOLCOMBE, TOM

 Address:
 2555 ENTERPRISE RD 9-1
 Address:
 1934 TIMBERLINE DRIVE

Address: 2555 ENTERPRISE RD 9-1 Address: 1934 TIMBERLINE DRIV
City-St-Zip: CLEARWATER, FL 33763 City-St-Zip: NAPLES, FL 34109

Title: () Delete Title: VSD (X) Change () Addition SCHIPPER, BRADFORD WEIDENMILLER, NICHOLAS Name: Name: 1180 RESERVE WAY 302 1230 RESERVE WAY #303 Address: Address: City-St-Zip: NAPLES, FL 34105 City-St-Zip: NAPLES, FL 34105

Title: () Delete Title: D () Change (X) Addition
Name: REIF, SUSAN

Address: Address: 100 SOUH CHARLES ST 4TH FLOOR

City-St-Zip: City-St-Zip: BALTMORE, MD 21201

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: PATRICK BISHOP PD 03/10/2009