

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011707

FILED
Feb 09, 2012
Secretary of State

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

Current Principal Place of Business:

1140 RESERVE WAY
NAPLES, FL 34105

New Principal Place of Business:

Current Mailing Address:

1140 RESERVE WAY
NAPLES, FL 34105

New Mailing Address:

FEI Number: 90-0266514

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOEDE, JOHN C
JOHN C. GOEDE, PA
8950 FONTANA DEL SOL WAY, STE. 100
NAPLES, FL 34109 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: PD
Name: PETER, HEWITT
Address: 1130 RESERVE WAY # 104
City-St-Zip: NAPLES, FL 34105

Title: VPD
Name: AHRENEN, NICK
Address: 1235 RESERVE WAY # 104
City-St-Zip: NAPLES, FL 34105

Title: TSR
Name: ALLARD, JOANNE
Address: 1200 RESERVE WAY #107
City-St-Zip: NAPLES, FL 34105

Title: SEC
Name: MERLO, LIVIO
Address: 115 RESERVE COURT # 301
City-St-Zip: NAPLES, FL 34105

Title: D
Name: CARRIAGA, JUAN
Address: 1170 RESERVE WAY # 207
City-St-Zip: NAPLES, FL 34105

Title: D
Name: MANGEN, ROBERT
Address: 1105 RESERVE CT # 302
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: JOANNE ALLARD

TSR

02/09/2012

Electronic Signature of Signing Officer or Director

Date