

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 09, 2010
Secretary of State

Entity Name: POSITANO PLACE AT NAPLES MASTER ASSOCIATION, INC.

Current Principal Place of Business:

12910 POSITANO CIRCLE
NAPLES, FL 34105

New Principal Place of Business:

Current Mailing Address:

12910 POSITANO CIRCLE
NAPLES, FL 34105

New Mailing Address:

FEI Number: 20-3992220

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAMOUCÉ, MURRELL & GAL, P.A.
ATTN: ROBERT E. MURRELL
5405 PARK CENTRAL COURT
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: COX, MIKE
Address: 12910 POSITANO CIRCLE
City-St-Zip: NAPLES, FL 34105

Title: DVP
Name: GORDON, STEVE
Address: 12910 POSITANO CIRCLE
City-St-Zip: NAPLES, FL 34105

Title: DST
Name: CROSSMAN, HOWARD
Address: 12910 POSITANO CIRCLE
City-St-Zip: NAPLES, FL 34105

Title: D
Name: NIGRO, TOM
Address: 12910 POSITANO CIRCLE
City-St-Zip: NAPLES, FL 34105

Title: D
Name: JERRY, MRAZ
Address: 12910 POSITANO CIRCLE
City-St-Zip: NAPLES, FL 34105

Title: D
Name: HRONEK, BILL
Address: 12910 POSITANO CIRCLE
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: MIKE COX

PD

04/09/2010

Electronic Signature of Signing Officer or Director

Date