2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2007
Secretary of State

DOCUMENT# N05801

Entity Name: LELY VILLAS ASSOCIATION, INC.

Current Principal Place of Business:

500 LOGAN BLD S
NAPLES, FL 34119 US

New Principal Place of Business:

Current Mailing Address:

500 LOGAN BLD S
4600 ENTERPRISE AVE STE A
NAPLES, FL 34119 US

New Mailing Address:

FEI Number: 59-2567258 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WRIGHT, RUSSELL
4600 ENTERPRISE AVE, STE A
NAPLES, FL 33942 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 ( ) Delete
Name: GAITENS, JIM
Address: 600 AUGUSTA BLVD
City-St-Zip: NAPLES, FL 34113

Title: D ( ) Delete
Name: WALRATH, JERRY
Address: 590 AUGUSTA BLVD
City-St-Zip: NAPLES, FL 34113

Title: TD ( ) Delete
Name: WAGNER, ERNEST
Address: 622 AUGUSTA BLVD
City-St-Zip: NAPLES, FL 34113

Title: SD ( ) Delete
Name: KELLEY, FRANK
Address: 594 AUGUSTA BLVD
City-St-Zip: NAPLES, FL 34113

Title: VPD ( ) Delete
Name: SKINNER, DUKE
Address: 592 AUGUSTA BLVD
City-St-Zip: NAPLES, FL 34113

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: DUKE SKINNER VPD 04/10/2007

Electronic Signature of Signing Officer or Director — Date