## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05801

FILED Apr 09, 2008 Secretary of State

Entity Name: LELY VILLAS ASSOCIATION, INC.

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

500 LOGAN BLD S NAPLES, FL 34119 US

Current Mailing Address: New Mailing Address:

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

FEI Number: 59-2567258 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:

WRIGHT, RUSSELL 4600 ENTERPRISE AVE, STE A NAPLES, FL 33942 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:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO 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

NAPLES, FL 34113

NAPLES, FL 34113

City-St-Zip:

City-St-Zip:

Title: VPD () Delete Name: SKINNER, DUKE Address: 592 AUGUSTA BLVD Title: SD (X) Change ( ) Addition

Name: GAITENS, CHARLENE Address: 600 AUGUSTA BLVD City-St-Zip: NAPLES, FL 34113

Title: TD (X) Change ( ) Addition

Name: TEAL, PAUL

Address: 626 AUGUSTA BLVD City-St-Zip: NAPLES, FL 34113

Title: VPD (X) Change ( ) Addition

Name: WAGNER, ERNEST Address: 622 AUGUSTA BLVD City-St-Zip: NAPLES, FL 34113

Name: VANLANVELT, TED Address: 620 AUGUSTA BLVD City-St-Zip: NAPLES, FL 34113

Title: D (X) Change ( ) Addition

Name: KINKEAD, MILES
Address: 646 AUGUSTA BLVD
City-St-Zip: NAPLES, FL 34113

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: TED VANLANVELT PD 04/09/2008