2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2011
Secretary of State

DOCUMENT# N05801

Entity Name: LELY VILLAS ASSOCIATION, INC.

Current Principal Place of Business:

C/O RESORT MANAGEMENT
2685 HORSESHOE DR S #215
NAPLES, FL 34104 US

New Principal Place of Business:

Current Mailing Address:

C/O RESORT MANAGEMENT
2685 HORSESHOE DR S #215
NAPLES, FL 34104 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:

VANLANKVELT, THEODORE
620 AUGUSTA BLVD
NAPLES, FL 34113 US

Name and Address of New Registered Agent:

LAW OFFICE OF JAMIE GREUSEL
1104 N COLLIER BLVD
MARCO ISLAND, FL 34145 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: JAMIE GREUSEL 04/26/2011
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

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

Title: S
Name: TEAL, JANE
Address: 626 AUGUSTA BLVD
City-St-Zip: NAPLES, FL 34113

Title: D
Name: ACKETTS, TONY
Address: 554 AUGUSTA BLVD
City-St-Zip: NAPLES, FL 34113

Title: VP
Name: VANLANKVELT, TED
Address: 620 AUGUSTA BLVD
City-St-Zip: NAPLES, FL 34113

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

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: MILES KINKEAD T 04/26/2011
Electronic Signature of Signing Officer or Director Date