

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000252

FILED  
Apr 16, 2009  
Secretary of State

Entity Name: VILLAGES AT STELLA MARIS CONDOMINIUM ASSOCIATION 2400, INC.

**Current Principal Place of Business:**

360 STELLA MORIS DR. N.  
NAPLES, FL 34614

**New Principal Place of Business:**

360 STELLA MARIS DR. N.  
NAPLES, FL 34614

**Current Mailing Address:**

PO BOX 110156  
NAPLES, FL 34108

**New Mailing Address:**

FEI Number: 20-4549520      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WHITE, WILHAM D CAM  
2310 DELLA DR.  
NAPLES, FL 34117 US

**Name and Address of New Registered Agent:**

WHITE, WILLIAM D CAM  
2310 DELLA DR.  
NAPLES, FL 34117 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: WILLIAM D. WHITE

04/16/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: TOMEK, FRANCIS  
Address: 11091 NW 12 MANOR  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: DVP ( ) Delete  
Name: CALVIN, DENNIS  
Address: 1019 RIO DR.  
City-St-Zip: GRAND BLANC, MI 48439

Title: DT ( ) Delete  
Name: DEMARCO, MARGARET  
Address: 360 STELLA MORIS DR. N. #2410  
City-St-Zip: NAPLES, FL 34114

Title: SMA ( ) Delete  
Name: WHITE, WILHAM D  
Address: 2310 DELLA DR.  
City-St-Zip: NAPLES, FL 34117

**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:

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: WILLIAM D. WHITE

SM

04/16/2009

Electronic Signature of Signing Officer or Director

Date