

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005387

FILED  
Apr 22, 2009  
Secretary of State

**Entity Name:** THE RESIDENCES OF LA PIAZZA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2600 GOLDEN GATE PKWY.  
NAPLES, FL 34105

**New Principal Place of Business:**

**Current Mailing Address:**

2600 GOLDEN GATE PKWY.  
NAPLES, FL 34105

**New Mailing Address:**

**FEI Number:** 20-4898321

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOAZ, BRADLEY A  
2600 GOLDEN GATE PKWY.  
NAPLES, FL 34105 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: D ( ) Delete  
Name: GABLE, R. BLAKE  
Address: 2600 GOLDEN GATE PKWY.  
City-St-Zip: NAPLES, FL 34105

Title: D ( ) Delete  
Name: BAIRD, DOUGLAS E  
Address: 2600 GOLDEN GATE PKWY.  
City-St-Zip: NAPLES, FL 34105

Title: D ( ) Delete  
Name: RONEY, PAUL  
Address: 5050 AVE MARIA BLVD., SUITE 327  
City-St-Zip: AVE MARIA, FL 341429505

**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:

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: DOUGLAS E BAIRD

D

04/22/2009

Electronic Signature of Signing Officer or Director

Date