

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012461

FILED
Mar 30, 2009
Secretary of State

Entity Name: PROVENCIA AT PASEO NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

C/O STOCK COMMUNITY SERVICES, LLC
2647 PROFESSIONAL CIRCLE, SUITE 1213
NAPLES, FL 34119

New Principal Place of Business:

1532 RIO DE JANEIRO AVE
PUNTA GORDA, FL 33938

Current Mailing Address:

PO BOX 380758
MURDOCK, FL 33938

New Mailing Address:

FEI Number: 20-8076534 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIVEY, BLAINE
4501 TAMiami TRAIL NORTH
SUITE 300
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

THE GATEWAY GROUP
1532 RIO DE JANEIRO AVE
PUNTA GORDA, FL 33983 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: KRISTINE WISHARD

03/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SPIVEY, BLAINE
Address: 2647 PROFESSIONAL CT. #1213
City-St-Zip: NAPLES, FL 34119

Title: VD () Delete
Name: HOULDSWORTH, SANDY
Address: 2647 PROFESSIONAL CT #1213
City-St-Zip: NAPLES, FL 34119

Title: STD (X) Delete
Name: GELDER, KEITH
Address: 2647 PROFESSIONAL CT #1213
City-St-Zip: NAPLES, FL 34119

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KOCSES, CHAD
Address: PO BOX 380758
City-St-Zip: MURDOCK, FL 33938

Title: VPST (X) Change () Addition
Name: GELDER, KEITH
Address: PO BOX 380758
City-St-Zip: MURDOCK, FL 33938

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: CHAD KOCSES

PD

03/30/2009

Electronic Signature of Signing Officer or Director

Date