

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012466

FILED  
Apr 16, 2009  
Secretary of State

**Entity Name:** THE LANDINGS AT LELY CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

965 PEGGY CIRCLE  
NAPLES, FL 34114

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 110156  
NAPLES, FL 34108

**New Mailing Address:**

**FEI Number:** 90-0356989

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WHITE, WILLIAM D CAM  
2310 DELLA DR  
NAPLES, FL 34117 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: DV ( ) Delete  
Name: WHITE, JAMES E  
Address: 960 PEGGY CIRCLE #704  
City-St-Zip: NAPLES, FL 34114

Title: PD ( ) Delete  
Name: MEURER, LENORE  
Address: 960 PEGGY CIRCLE, #701  
City-St-Zip: NAPLES, FL 34113

Title: DT ( ) Delete  
Name: DEVITO, BENITO  
Address: 3851 JUNGLE PLUM DR E  
City-St-Zip: NAPLES, FL 34114

Title: SM ( ) Delete  
Name: WHITE, WILLIAM D  
Address: P.O. BOX 710156  
City-St-Zip: NAPLES, FL 34108

**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