2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

Jun 27, 2008 8:00 am Secretary of State DOCUMENT # N07000001875 06-27-2008 90001 032 ****61.25 MARENGO AT FIDDLER'S CREEK CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address WOODWARD, PIRES & LOMBARDO, P.A. WOODWARD, PIRES & LOMBARDO, P.A. 20007569 3200 TAMIAMI TRAIL NORTH, SUITE 200 3200 TAMIAMI TRAIL NORTH, SUITE 200 NAPLES, FL 34103 NAPLES, FL 34103 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 06162008 Chg-NP CR2E037 (12/06) City & State City & State 4. FEI Number 20-8520517 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WOODWARD, MARK J ESQ. WOODWARD, PIRES & LOMBARDO, P.A. Street Address (P.O. Box Number is Not Acceptable) 3200 TAMIAMI TRAIL NORTH, SUITE 200 NAPLES, FL 34103 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to Fillng Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Due by September 12, 2008 Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. Delete ☐ Change TITLE TITLE ☐ Addition Parisi, Joseph Livio 8156 Fiddler's Creek Parkway NAME NAME STREET ADDRESS STREET ADDRESS Naples, FL 34114 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition SD NAME NAME DiNardo, Anthony STREET ADDRESS STREET ADDRESS 8156 Fiddler's Creek Parkway CITY-ST-ZIP CITY-ST-ZIP Naples, FL 34114 ☐ Delete TITLE ☐ Change ☐ Addition TITLE TD Humes, Jackie NAME NAME STREET ADDRESS STREET ADDRESS 8156 Fiddler's Creek Parkway CITY-ST-ZIP CITY-ST-ZIP Naples, FL 34114 Delete ☐ Change ■ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Delete TITLE ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

nged Name of Signing of Ficer on Director
Parisi as President and Not Individually

SIGNATURE:

FILED

(239) 732-9400

Daytime Phone #