2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2009
Secretary of State

DOCUMENT# N08000001747

Entity Name: DI NAPOLI CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

8430 ENTERPRISES CIR
BRADENTON, FL 342024108

New Principal Place of Business:

8359 BEACON BLVD.
SUITE 313
FORT MYERS, FL 33907

Current Mailing Address:

C/O TAYLOR MORRISON OF FLORIDA, INC.
8430 ENTERPRISE CIRCLE SUITE 100
BRADENTON, FL 342024108

New Mailing Address:

8359 BEACON BLVD.
SUITE 313
FORT MYERS, FL 33907

FEI Number: 20-2014673 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUITVE PARK DR STE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

HAYDEN & ASSOCIATES
8359 BEACON BLVD.
SUITE 313
FORT MYERS, FL 33907 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: KENNETH W. HAYDEN 02/27/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: FICHTER, THOMAS P JR
Address: 8430 ENTERPRISE CIRCLE SUITE 100
City-St-Zip: BRADENTON, FL 342024108

Title: VD ( ) Delete
Name: KEMPTON, JOHN S
Address: 8430 ENTERPRISE CIRCLE SUITE 100
City-St-Zip: BRADENTON, FL 342024108

Title: VD ( ) Delete
Name: FOOTE, TERRY L
Address: 8430 ENTERPRISE CIRCLE SUITE 100
City-St-Zip: BRADENTON, FL 342024108

Title: VTS ( ) Delete
Name: CAMPBELL, MICHELLE M
Address: 8430 ENTERPRISE CIRCLE SUITE 100
City-St-Zip: BRADENTON, FL 342024108

Title: S ( ) Delete
Name: WOLF, PHILIP C
Address: 8430 ENTERPRISE CIRCLE SUITE 100
City-St-Zip: BRADENTON, FL 342024108

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: FICHTER, THOMAS P JR
Address: 8430 ENTERPRISE CIRCLE SUITE 100
City-St-Zip: BRADENTON, FL 342024108

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: THOMAS FICHTER P 02/27/2009
Electronic Signature of Signing Officer or Director Date