

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001747

FILED
Mar 31, 2010
Secretary of State

Entity Name: DI NAPOLI CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

8359 BEACON BLVD.
SUITE 313
FORT MYERS, FL 33907

New Principal Place of Business:

501 N. CATTLEMEN ROAD
SUITE 100
SARASOTA, FL 34232 US

Current Mailing Address:

8359 BEACON BLVD.
SUITE 313
FORT MYERS, FL 33907

New Mailing Address:

501 N. CATTLEMEN ROAD
SUITE 100
SARASOTA, FL 34232 US

FEI Number: 20-2014673

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAYDEN & ASSOCIATES
8359 BEACON BLVD.
SUITE 313
FORT MYERS, FL 33907 US

Name and Address of New Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR., #4
WESTON, FL 33331 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: SHARON K. GRAY, ASST. SEC. TO NRAI

03/31/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: ASHER, JOHN P
Address: 501 N. CATTLEMEN ROAD, SUITE 100
City-St-Zip: SARASOTA, FL 34232 US

Title: VP
Name: KEMPTON, JOHN S
Address: 501 N. CATTLEMEN ROAD, SUITE 100
City-St-Zip: SARASOTA, FL 34232 US

Title: VP1
Name: WILMETH, RICHARD M
Address: 501 N. CATTLEMEN ROAD, SUITE 100
City-St-Zip: SARASOTA, FL 34232 US

Title: VP2
Name: FICHTER, JR., THOMAS P
Address: 501 N. CATTLEMEN ROAD, SUITE 100
City-St-Zip: SARASOTA, FL 34232 US

Title: SD
Name: FICHTER, JR., THOMAS P
Address: 501 N. CATTLEMEN ROAD, SUITE 100
City-St-Zip: SARASOTA, FL 34232 US

Title: TD
Name: WILMETH, RICHARD M
Address: 501 N. CATTLEMEN ROAD, SUITE 100
City-St-Zip: SARASOTA, FL 34232 US

I hereby 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 all other like empowered.

SIGNATURE: JOHN P. ASHER

P

03/31/2010

Electronic Signature of Signing Officer or Director

Date