

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08940

FILED
Apr 27, 2007
Secretary of State

Entity Name: NAPLES WINTERPARK III, INC.

Current Principal Place of Business:

3800-46 SNOWFLAKE LANE
NAPLES, FL 34112 US

New Principal Place of Business:

Current Mailing Address:

GUARDIAN PROPERTY MANAGEMENT
6700 LONE OAK BLVD
NAPLES, FL 34109 US

New Mailing Address:

MOORE PROPERTY MANAGEMENT, LLC
745 12TH AVE. S. #AA
NAPLES, FL 34102 US

FEI Number: 59-2545331

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUARDIAN PROPERTY MANAGEMENT
6700 LONE OAK BLVD
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

MOORE PROPERTY MANAGEMENT, LLC
745 12TH AVE. S.
AA
NAPLES, FL 34102 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: GRAHAM NORCOMBE

04/27/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DAVIES, LESLEY
Address: 3840 SNOWFLAKE LN.
City-St-Zip: NAPLES, FL 34112

Title: VP () Delete
Name: BIANCHI, JIM
Address: 3806 SNOWFLAKE LN
City-St-Zip: NAPLES, FL 34112

Title: SDTD () Delete
Name: FREE, MARTIN
Address: 3830 SNOWFLAKE LN.
City-St-Zip: NAPLES, FL 34112

Title: D () Delete
Name: STARR, KAREN
Address: 3804 SNOWFLAKE LANE
City-St-Zip: NAPLES, FL 34112

Title: D (X) Delete
Name: FOPPIANI, MARIE
Address: 3812 SNOWFLAKE LANE
City-St-Zip: NAPLES, FL 34112

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: FOPPIANO, MARIE
Address: 3812 SNOWFLAKE LANE
City-St-Zip: NAPLES, FL 34112

Title: S (X) Change () Addition
Name: STARR, KAREN
Address: 3804 SNOWFLAKE LANE
City-St-Zip: NAPLES, FL 34112

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: LESLEY DAVIES

P

04/27/2007

Electronic Signature of Signing Officer or Director

Date