

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09796

FILED
Apr 02, 2010
Secretary of State

Entity Name: THE RETREAT AT NAPLES NO. ONE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

544 RETREAT DR.
NAPLES, FL 34110 US

New Principal Place of Business:

Current Mailing Address:

COLLIER FINANCIAL, INC.
4985 TAMiami TRAIL E.
NAPLES, FL 34113 US

New Mailing Address:

FEI Number: 59-2330202 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

STEPHEN P HART
COLLIER FINANCIAL INC.
4985 TAMiami TR E
NAPLES, FL 34113 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: D
Name: RUTTMAN, JERRY
Address: 528 RETREAT DR. #101
City-St-Zip: NAPLES, FL 34110

Title: TD
Name: LITTLEFIELD, MIKE
Address: 544 RETREAT DRIVE #201
City-St-Zip: NAPLES, FL 34110

Title: PD
Name: DIXON, LLOYD
Address: 541 LAKE LOUISE CIRCLE #201
City-St-Zip: NAPLES, FL 34110

Title: VD
Name: GILGER, ELIZABETH B
Address: 560 RETREAT DR #203
City-St-Zip: NAPLES, FL 34110

Title: SD
Name: BLODGETT, MARION
Address: 544 RETREAT DRIVE, #204
City-St-Zip: NAPLES, FL 34110

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: LLOYD DIXON

PD

04/02/2010

Electronic Signature of Signing Officer or Director

Date