

Doc #: N10722
Naples Park Area
Association, Inc.

FILED
Jul 17, 2006 8:00 am
Secretary of State

07-17-2006 90141 012 ****70.00

Principal Place of Business 655 103RD AVE N NAPLES, FL 34108 US		Mailing Address 736 100TH AVE NORTH NAPLES, FL 34108 US	
2. Principal Place of Business		3. Mailing Address PO Box 770484	
Suite, Apt. #, etc.		Suite, Apt. #, etc. VANDERBILT BEACH	
City & State		City & State NAPLES FL.	
Zip	Country	Zip	Country
		34107-0484	USA
4. FEI Number 59-2470953		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SOURBEER, MARIE T 736 100TH AVE NORTH NAPLES, FL 34108		7. Name and Address of New Registered Agent Name KAY PELEY Street Address (P.O. Box Number is Not Acceptable) 586 108 AV. N. City NAPLES FL Zip Code 34108	
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 Kay Peley - Kay Peley Treasurer - 7-12-06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
Filing Fee is \$61.25 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GIUSTINIANI, HISAKO 722 - 103RD AVE. N NAPLES, FL 34108 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOHN AUSTIN 857 97th AV. N. NAPLES, FL 34108 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BATEMAN, BARBARA 679-106TH AVE. NAPLES, FL 34108 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOSEPH SQUIZZERO 703 108th AV. N. NAPLES, FL 34108 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LUCANEGRO, MILDRED 591 - 109TH AVE NORTH NAPLES, FL 34108 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRINSON, JOHN 725 97TH AVE. N. NAPLES, FL 34108 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PALUMBO, ROSE 699 100TH AVE N NAPLES, FL 34108 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P OLGA WILLIAMS 762 97th AV. N. NAPLES, FL 34108 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SOURBEER, MARIE 736 100 AVE. N. NAPLES, FL 34108 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KAY PELEY 586 108 AV. N. NAPLES, FL 34108 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing 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.			
SIGNATURE: Olga Williams OLGA WILLIAMS 7-10-06 (239) 566-8792 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>			