2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11491

FILED Jan 11, 2012 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

537 LAKE LOUISE CIRCLE 537 LAKE LOUISE CIRCLE APT 101 APT 101

NAPLES, FL 34110 NAPLES, FL 34110 US

Current Mailing Address: New Mailing Address:

 537 LAKE LOUISE CIRCLE
 537 LAKE LOUISE CIRCLE

 APT 101
 APT 101

 NAPLES, FL 34110
 NAPLES, FL 34110

FEI Number: 59-2330201 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ANDERSON, CAMERON 537 LAKE LOUISE CIRCLE APT 101 NAPLES, FL 34110 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: ANDERSON, CAMERON

Address: 537 LAKE LOUISE CIRCLE APT 101

City-St-Zip: NAPLES, FL 34110

Title: T

Name: CUCURO, RONALD DR.

Address: 537 LAKE LOUISE CIRCLE APT 102

City-St-Zip: NAPLES, FL 34110

Title:

Name: SACCHETTI, DOMINIC

Address: 521 LAKE LOUISE COURT APT 101

City-St-Zip: NAPLES, FL 34110

Title: D

Name: GEISELHART, THOMAS Address: 517 LAKE LOUISE CT APT. 201

City-St-Zip: NAPLES, FL 34110

Title:

Name: VANHASSEL, HERB

Address: 517 LAKE LOUISE CT. APT 103

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: CAMERON ANDERSON P 01/11/2012