2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11545

FILED Apr 28, 2006 Secretary of State

Entity Name: VILLAGE WEST OF NAPLES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
P O BOX 1 NAPLES, I		JS	4306 ARNOLD AVEN NAPLES, FL 34104	IUE US	
Current N	lailing Addres	ss:	New Mailing Addres	ss:	
P.O. BOX NAPLES, I	110339 FL 34108				
El Number	: 59-2623585	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:	
NAPLES, I	OLD AVE. FL 34104 L named entity s	JS submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
1306 ARN NAPLES, I The above n the State	OLD AVE. FL 34104 U named entity se of Florida.		urpose of changing its registere	ed office or registered agent, or both,	
1306 ARŇ NAPLES, I The above	OLD AVE. FL 34104 U named entity se of Florida. RE:	submits this statement for the p		ed office or registered agent, or both, Date	
4306 ARN NAPLES, I The above n the State BIGNATUI	OLD AVE. FL 34104 U named entity se of Florida. RE:	submits this statement for the particles of Registered Age	ent		
4306 ARN NAPLES, I The above n the State BIGNATUI	OLD AVE. FL 34104 Use named entity see of Florida. RE: Electron S AND DIREC	submits this statement for the particles of Registered Age TORS: Delete ENNIFER VD.	ent	Date	
4306 ARN NAPLES, I The above In the State BIGNATUI DFFICER: Value: Valu	OLD AVE. FL 34104 Use named entity see of Florida. RE: Electron S AND DIREC DP () SCHOOLEY, JE 4934 WEST BL NAPLES, FL 36	submits this statement for the partic Signature of Registered Age TORS:) Delete ENNIFER VD. 4103) Delete ENT VD.	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS	

I hereby certify that the information supplied with this filing does not qualify for the 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: JENNIFER SCHOOLEY DP 04/28/2006