# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 23, 2007**
**Secretary of State**

DOCUMENT# N15106

**Entity Name:** NAPLES WINTERPARK NORTH, INC.

**Current Principal Place of Business:**

6700 LONE OAK BLVD
NAPLES, FL 34109

**New Principal Place of Business:**

**Current Mailing Address:**

6700 LONE OAK BLVD
NAPLES, FL 34109

**New Mailing Address:**

**FEI Number: 59-3847689** **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:**

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: P ( ) Delete
Name: WALSH, ALAN
Address: 3400 FROSTY WAY # 9
City-St-Zip: NAPLES, FL 34112

Title: VP ( ) Delete
Name: MUGFORD, LARRY
Address: 3420 FROSTY WAY # 6
City-St-Zip: NAPLES, FL 34112

Title: S ( ) Delete
Name: HEALEY, JUDIA
Address: 3470 FROSTY WAY # 4
City-St-Zip: NAPLES, FL 34112

Title: D ( ) Delete
Name: WALSH, KEVIN
Address: 3450 FROSTY WAY #10
City-St-Zip: NAPLES, FL 34112

Title: D ( ) Delete
Name: WEGNER, PAUL
Address: 3460 FROSTY WAY # 6
City-St-Zip: NAPLES, FL 34112

Title: D ( ) Delete
Name: FERGUSON, JIM
Address: 3480 FROSTY WAY # 6
City-St-Zip: NAPLES, FL 34112

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition
Name: WALSH, ALAN
Address: 3400 FROSTY WAY # 9
City-St-Zip: NAPLES, FL 34112

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

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

Title: T (X) Change ( ) Addition
Name: WALSH, KEVIN
Address: 3450 FROSTY WAY #10
City-St-Zip: NAPLES, FL 34112

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

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

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: BYRON ROSS MGR 04/23/2007

Electronic Signature of Signing Officer or Director — Date