2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15106

FILED Apr 23, 2008 Secretary of State

Entity Name: NAPLES WINTERPARK NORTH, INC.

Current Principal Place of Business: New Principal Place of Business: 6700 LONE OAK BLVD NAPLES, FL 34109 **Current Mailing Address: New Mailing Address:** 6700 LONE OAK BLVD NAPLES, FL 34109 FEI Number: 59-3847689 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: **GUARDIAN PROPERTY MANAGEMENT** 6700 LONE OAK BLVD NAPLES, FL 34109 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition WALSH, ALAN Name: Name: 3400 FROSTY WAY # 9 Address: Address: City-St-Zip: NAPLES, FL 34112 City-St-Zip: Title: Title: (X) Change () Addition () Delete MUGFORD, LARRY Name: GILPIN, ALBERT Name: Address: 3420 FROSTY WAY # 6 Address: 3400 FROSTY WAY #9 City-St-Zip: NAPLES, FL 34112 City-St-Zip: NAPLES, FL 34112 Title: () Delete Title: () Change () Addition HEALEY, JUDIA Name: Name: Address: 3470 FROSTY WAY # 4 Address: City-St-Zip: NAPLES, FL 34112 City-St-Zip: Title: () Delete Title: () Change () Addition Name: WALSH, KEVIN Name: 3450 FROSTY WAY #10 Address: Address: City-St-Zip: NAPLES, FL 34112 City-St-Zip: Title: () Delete Title: () Change () Addition WEGNER, PAUL Name: Name: 3460 FROSTY WAY # 6 Address: Address: City-St-Zip: NAPLES, FL 34112 City-St-Zip: Title: () Delete Title: (X) Change () Addition FERGUSON, JIM FERGUSON, JIM Name: Name: Address: 3480 FROSTY WAY # 6 Address: 3480 FROSTY WAY # 6 NAPLES, FL 34112 NAPLES, FL 34112 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JIM FERGUSON P 04/23/2008