

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18361

FILED
Feb 16, 2012
Secretary of State

Entity Name: TRAFALGAR SQUARE CONDOMINIUM ASSOCIATION OF NAPLES, INC.

Current Principal Place of Business:

% NEWELL PROPERTY MANAGEMENT CORPORATION
5435 JAEGER ROAD #4
NAPLES, FL 34109 US

New Principal Place of Business:

Current Mailing Address:

% NEWELL PROPERTY MANAGEMENT CORPORATION
5435 JAEGER ROAD #4
NAPLES, FL 34109 US

New Mailing Address:

FEI Number: 59-2780670

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEWELL, WILLIAM A
5435 JAEGER ROAD #4
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: PD
Name: DAVIS, CHRISTIAN
Address: 1494B TRAFALGAR LANE
City-St-Zip: NAPLES, FL 34116

Title: VD
Name: CARPENTER, MARK
Address: 1535B TRAFALGAR LANE
City-St-Zip: NAPLES, FL 34116

Title: SD
Name: ATER, LINDA
Address: 1566B TRAFALGAR LANE
City-St-Zip: NAPLES, FL 34116

Title: TD
Name: BOYLE, BARBARA
Address: 1542D TRAFALGAR LANE
City-St-Zip: NAPLES, FL 34116

Title: D
Name: SMITH, DAVID
Address: 1566D TRAFALGAR LANE
City-St-Zip: NAPLES, FL 34116

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: CHRISTIAN DAVIS

PD

02/16/2012

Electronic Signature of Signing Officer or Director

Date