

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18878

FILED
Mar 21, 2007
Secretary of State

Entity Name: REGENCY WOODS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2265 AIRPORT RD SOUTH
NAPLES, FL 34104 US

New Principal Place of Business:

265 AIRPORT RD SOUTH
NAPLES, FL 34104 US

Current Mailing Address:

265 AIRPORT RD SOUTH
NAPLES, FL 34104 US

New Mailing Address:

FEI Number: 65-0039286

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

R&P PROPERTY MANAGEMENT
265 AIRPORT ROAD SOUTH
NAPLES, FL 34104 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: D () Delete
Name: LYON, JOSEPH
Address: 4951 PEPPER CIRCLE #A-204
City-St-Zip: NAPLES, FL 34113

Title: VPD () Delete
Name: HEMELT 111, WILLIAM
Address: 4983 PEPPER CIRCLE #H-101
City-St-Zip: NAPLES, FL 34113

Title: PD () Delete
Name: MAGERO, KEITH
Address: 4977 PEPPER CIRCLE, G-201
City-St-Zip: NAPLES, FL 34113

Title: TD () Delete
Name: DURKIN, MICHELLE
Address: 4983 PEPPER CIRCLE, H-103
City-St-Zip: NAPLES, FL 34113

Title: SD () Delete
Name: ANDERSON, RUTH
Address: 540 DAYTON STREET #101
City-St-Zip: NAPLES, FL 33324

Title: D (X) Delete
Name: HALE, PHYLLIS
Address: 4977 PEPPER CIRCLE, G-103
City-St-Zip: NAPLES, FL 34113

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPD (X) Change () Addition
Name: MUCK, DAVID
Address: 4977 PEPPER CIRCLE #G-205
City-St-Zip: NAPLES, FL 34113

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

Title: STD (X) Change () Addition
Name: DURKIN, MICHELLE
Address: 4983 PEPPER CIRCLE, H-103
City-St-Zip: NAPLES, FL 34113

Title: D (X) Change () Addition
Name: NEWSOME, BOB
Address: 102 BLUFF STREET
City-St-Zip: CLIO, MI 48420

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: GLENN CARROLL

PRES

03/21/2007

Electronic Signature of Signing Officer or Director

Date