

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20494

FILED
Mar 10, 2010
Secretary of State

Entity Name: THE RETREAT WATERSIDE, INC.

Current Principal Place of Business:

C/O R & P PROPERTY MANAGEMENT
265 AIRPORT RD S
NAPLES, FL 34104 US

New Principal Place of Business:

Current Mailing Address:

C/O R & P PROPERTY MANAGEMENT
265 AIRPORT RD S
NAPLES, FL 34104 US

New Mailing Address:

FEI Number: 59-2776283

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 RD S
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: SD
Name: SHAVEL, JERRY
Address: 605 BUCKINGHAM DRIVE
City-St-Zip: GREENSBURG, PA 15601

Title: PD
Name: BOLTZ, LARRY
Address: 503 LAKE LOUISE CIR 201
City-St-Zip: NAPLES, FL 34110

Title: VPD
Name: HADFIELD, WALTER
Address: 30 RUFF CIRCLE
City-St-Zip: GLASTONBURY, CT 06033

Title: TD
Name: MURPHY, DENNIS
Address: 505 LAKE LOUISE CIRCLE #102
City-St-Zip: NAPLES, FL 34110

Title: D
Name: PATRICK, PENNY
Address: 501 LAKE LOUISE CIRCLE #104
City-St-Zip: NAPLES, FL 34110

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: LARRY BOLTZ

PD

03/10/2010

Electronic Signature of Signing Officer or Director

Date