2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21306

FILED May 05, 2009 Secretary of State

Entity Name: THE COMMONS PROPERTY OWNERS ASSOCIATION, INC.

^ E				
Current Principal Place of Business:		New Principal Pla	New Principal Place of Business:	
720 GOOI	CORPORATION DLETTE ROAD, SUITE 202 FL 34102 US			
Current Mailing Address:		New Mailing Addr	New Mailing Address:	
720 GOOI	CORPORATION DLETTE ROAD, SUITE 202 FL 34102 US			
ln accordar	r: 65-0315208 FEI Number Applied For () nce with s. 607.193(2)(b), F.S., the corporation did not d Address of Current Registered Agent:		Certificate of Status Desired () s of New Registered Agent:	
SUITE 202 NAPLES, The above	DLETTE ROAD	rpose of changing its registe	ered office or registered agent, or both,	
CICKIATII	DE			
SIGNATU		nt .	Data	
	Electronic Signature of Registered Ager		Date Date	
SIGNATU OFFICER			Date IGES TO OFFICERS AND DIRECTOR	
	Electronic Signature of Registered Ager			
OFFICER Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	Electronic Signature of Registered Ager S AND DIRECTORS: P () Delete NICHOLS, JERRY 999 VANDERBILT BEACH ROAD #500	ADDITIONS/CHAN Title: Name: Address:	IGES TO OFFICERS AND DIRECTOR	
OFFICER Title: Name: Address:	Electronic Signature of Registered Ager S AND DIRECTORS: P () Delete NICHOLS, JERRY 999 VANDERBILT BEACH ROAD #500 NAPLES, FL 34109 VP () Delete MACE, ED 720 GOODLETTE ROAD, #202	ADDITIONS/CHAN Title: Name: Address: City-St-Zip: Title: Name: Address:	IGES TO OFFICERS AND DIRECTOR () Change () Addition	
OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address: Name: Address:	Electronic Signature of Registered Ager S AND DIRECTORS: P () Delete NICHOLS, JERRY 999 VANDERBILT BEACH ROAD #500 NAPLES, FL 34109 VP () Delete MACE, ED 720 GOODLETTE ROAD, #202 NAPLES, FL 34102 S () Delete WANKLYN, JOHN 1100 FIFTH AVENUE S. #201	ADDITIONS/CHAN Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	IGES TO OFFICERS AND DIRECTOR () Change () Addition () Change () Addition	

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: EDWARD J. MACE VP 05/05/2009