

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24581

FILED
Mar 31, 2011
Secretary of State

Entity Name: BERKSHIRE LAKES MASTER ASSOCIATION, INC.

Current Principal Place of Business:

495 BELVILLE BLVD.
NAPLES, FL 34104 US

New Principal Place of Business:

Current Mailing Address:

C/O ABILITY MANAGEMENT, INC.
6736 LONE OAK BLVD.
NAPLES, FL 34109 US

New Mailing Address:

FEI Number: 65-0044550 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ABILITY MANAGEMENT, INC
6736 LONE OAK BLVD.
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

LIVELY, DENNIS F
C/O ABILITY MANAGEMENT, INC
6736 LONE OAK BLVD
NAPLES, FL 34109 US

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: DENNIS F LIVELY

03/31/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: LUPARELLO, ROBERT
Address: 628-LAMBTON LANE
City-St-Zip: NAPLES, FL 34104

Title: VPD
Name: MARO, TONY
Address: 267-LAMBTON LANE
City-St-Zip: NAPLES, FL 34104

Title: T
Name: LACROIX, ORIE
Address: 945 NEW WATERFORD DR, #102
City-St-Zip: NAPLES, FL 34104

Title: S
Name: SCHUDEL, BETTY
Address: 6644 VANCOUVER LANE
City-St-Zip: NAPLES, FL 34104

Title: D
Name: OLSEN, KEN
Address: 687-MELVILLE CT.
City-St-Zip: NAPLES, FL 34104

Title: D
Name: SHERMAN, THOMAS
Address: 7733 HAVERHILL COURT
City-St-Zip: NAPLES, FL 34104

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: DENNIS F LIVELY

RA

03/31/2011

Electronic Signature of Signing Officer or Director

Date