

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25225

FILED
Mar 31, 2009
Secretary of State

Entity Name: NAPLES WINTERPARK VIII, INC.

Current Principal Place of Business:

6736 LONE OAK BLVD.
NAPLES, FL 341096834 US

New Principal Place of Business:

Current Mailing Address:

6736 LONE OAK BLVD.
NAPLES, FL 341096834 US

New Mailing Address:

C/O ABILITY MANAGEMENT, INC
6736 LONE OAK BLVD
NAPLES, FL 341096834 US

FEI Number: 65-0030981

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIVELY, DENNIS F
6736 LONE OAK BLVD.
NAPLES, FL 341096834 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 () Delete
Name: CASANOVA, RONALD
Address: 2732 ORANGE GROVE TRAIL
City-St-Zip: NAPLES, FL 34112

Title: D () Delete
Name: SEBER, DOROTHEA
Address: 4260 JACK FROST CT #7
City-St-Zip: NAPLES, FL 34112

Title: SD () Delete
Name: MCEVOY, MARGARET
Address: 4240 JACK FROST #8
City-St-Zip: NAPLES, FL 34112

Title: TD () Delete
Name: WENZEL, RICHARD
Address: 4260 JACK FROST #6
City-St-Zip: NAPLES, FL 34112

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change () Addition
Name: MCEVOY, DENNIS
Address: 4240 JACK FROST #8
City-St-Zip: NAPLES, FL 34112

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

Title: T () Change (X) Addition
Name: LODEN, JOHN
Address: 4220 LOOKING GLASS LANE #4
City-St-Zip: NAPLES, FL 34112 US

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: DENNIS F. LIVELY

RA

03/31/2009

Electronic Signature of Signing Officer or Director

Date