

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27192

FILED
Feb 07, 2009
Secretary of State

Entity Name: PAVILION CLUB CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

805 GULF PAVILION DR.
NAPLES, FL 34108 US

New Principal Place of Business:

806 GULF PAVILION DR.
NAPLES, FL 34108 US

Current Mailing Address:

805 GULF PAVILION DR.
NAPLES, FL 34108 US

New Mailing Address:

806 GULF PAVILION DR.
NAPLES, FL 34108 US

FEI Number: 65-0058920

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAMONCE MURRELL R GAL P A
5405 PARK CENTRAL CRT
NAPLES, FL 34109 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: P () Delete
Name: RAND, DORIS JEAN
Address: 870 GULF PAVILION DR., #101
City-St-Zip: NAPLES, FL 34108

Title: V () Delete
Name: LEVELL, SUE
Address: 816 GULF PAVILION DR #102
City-St-Zip: NAPLES, FL 34108

Title: TD () Delete
Name: GAKOS, SOPHOCLES
Address: 816 GULF PAVILION DR #202
City-St-Zip: NAPLES, FL 34108

Title: SD () Delete
Name: PRESTON, KATHLEEN
Address: 810 GULF PAVILION DR #202
City-St-Zip: NAPLES, FL 34108

Title: AVD () Delete
Name: ANDREWES, CHARLES
Address: 810 GULF PAVILION DR #104
City-St-Zip: NAPLES, FL 34108

Title: ATD () Delete
Name: JOHNSTONE, DOLORES
Address: 876 GULF PAVILION DR #103
City-St-Zip: NAPLES, FL 34108

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: DORIS JEAN RAND

P

02/07/2009

Electronic Signature of Signing Officer or Director

Date