

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2006 8:00 am
Secretary of State

04-14-2006 90148 031 ****61.25

DOCUMENT # N29419 1. Entity Name EMERALD LAKES RESIDENT'S ASSOCIATION, INC.					
Principal Place of Business 10621 AIRPORT PULLING RD N SUITE 8 NAPLES, FL 34109 US			Mailing Address 10621 AIRPORT PULLING RD N SUITE 8 NAPLES, FL 34109 US		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 65-0063469	
5. Certificate of Status Desired <input type="checkbox"/>		Applied For Not Applicable			
6. Name and Address of Current Registered Agent AMERICAN PROPERTY MGT 10621 AIRPORT PULLING RD N SUITE 8 NAPLES, FL 34109				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
8. 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. I am familiar with, and accept the obligations of registered agent.				\$8.75 Additional Fee Required	
SIGNATURE <u>Robert Titus Managing Agent</u> <small>(Signature, typed or printed name of registered agent and title if applicable)</small>				DATE <u>4/11/06</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>	
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP PROUTY, ROBERT S 7719 JEWEL LANE #104 NAPLES, FL 34109		TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT Warren Cole 7760 Emerald Circle #203S Naples, FLA. 34109	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP GOFF, CLAIRE 7079 MILL POND CIRCLE NAPLES, FL 34109		TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Ken Engler 2318 Mill Stream Dr. Naples FLA. 34109	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ROSE, ORVILLE 7756 JEWEL LANE # 204 NAPLES, FL 34109		TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Donald Dilg 7678 Mill Stream Dr Naples FLA. 34109	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Robert Titus Managing Agent</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				DATE <u>4/11/06</u> DAYTIME PHONE # <u>239-596-1886</u>	

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