

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30213

FILED
Apr 10, 2009
Secretary of State

Entity Name: EMERALD LAKES UNIT ONE NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

%GUARDIAN PROPERTY MANAGEMENT
6700 LONE OAK BLVD
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

6700 LONE OAK BLVD
NAPLES, FL 34109

New Mailing Address:

FEI Number: 65-0748450

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSS, BYRON
6700 LONE OAK BLVD
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

GUARDIAN PROPERTY MANAGEMENT
6700 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: BYRON ROSS

04/10/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WAINSCOTT, FOREST
Address: 7527 MILL POND CIRCLE
City-St-Zip: NAPLES, FL 34109

Title: VP () Delete
Name: DONAT, LINDA
Address: 7343 MILL POND CIRCLE
City-St-Zip: NAPLES, FL 34109

Title: S () Delete
Name: TOWELL, NANCY
Address: 7047 MILL POND CIRCLE
City-St-Zip: NAPLES, FL 34109

Title: T () Delete
Name: DIAMOND, PHIL
Address: 7119 MILL POND CIRCLE
City-St-Zip: NAPLES, FL 34109

Title: D () Delete
Name: DILG, DON
Address: 7678 MILL STREAM DRIVE
City-St-Zip: NAPLES, FL 34109

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:

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: BYRON ROSS

MGR

04/10/2009

Electronic Signature of Signing Officer or Director

Date