

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30820

FILED
Apr 15, 2009
Secretary of State

Entity Name: ARBORESQUE OF OLDE NAPLES, CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O RUTH E. MAST
291 - 4TH ST. S
NAPLES, FL 33940

New Principal Place of Business:

C/O JOHN LANNING
291 - 4TH ST. S
NAPLES, FL 33940

Current Mailing Address:

501 GOODLETTE RD. N.
SUITE C-200
NAPLES, FL 34102

New Mailing Address:

FEI Number: 65-0203439 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COASTAL PROPERTY MANAGEMENT OF SW FL
501 GOODLETTE RD. N.
SUITE C-200
NAPLES, FL 34102 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: MAST, RUTH
Address: 291 -4TH ST SO
City-St-Zip: NAPLES, FL 34102

Title: VP () Delete
Name: GOATER, RICHARD
Address: 281 -4TH ST SO
City-St-Zip: NAPLES, FL 34102

Title: S () Delete
Name: LANNING, JUDY
Address: 295 4TH STREET SOUTH
City-St-Zip: NAPLES, FL 34102

Title: ST (X) Delete
Name: GOATER, DOTTIE
Address: 281 4TH ST S
City-St-Zip: NAPLES, FL 34102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LANANING, JOHN
Address: 291 -4TH ST SO
City-St-Zip: NAPLES, FL 34102

Title: T (X) Change () Addition
Name: MAST, RUTH
Address: 281 -4TH ST SO
City-St-Zip: NAPLES, FL 34102

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: JOHN S GREEN

MGR

04/15/2009

Electronic Signature of Signing Officer or Director

Date