

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 29, 2004  
Secretary of State**

DOCUMENT# N31388

Entity Name: ST. SIMONE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O R & P PROP MGMT  
265 AIRPORT RD S  
NAPLES, FL 34104 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O R & P PROP MGMT  
265 AIRPORT RD S  
NAPLES, FL 34104 US

**New Mailing Address:**

FEI Number: 59-2941002      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

R&P PROPTY MGT  
265 AIRPORT RD S  
NAPLES, FL 34104 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: TD ( ) Delete  
Name: KERN, SYDNEY  
Address: 5635 TURTLE BAY DR #12  
City-St-Zip: NAPLES, FL 34108

Title: D ( ) Delete  
Name: ARTHUR, PENNETTA  
Address: 5635 TURTLE BAY, DR 9  
City-St-Zip: NAPLES, FL 34105

Title: VP ( ) Delete  
Name: JEFFRIES, DEEDEE  
Address: 5635 TURTLE BAY DR 2  
City-St-Zip: NAPLES, FL 34106

Title: P ( ) Delete  
Name: FERRARI, ANTHONY  
Address: 5637 TURTLE BAY DR #22  
City-St-Zip: NAPLES, FL

Title: S ( ) Delete  
Name: KRAUSE, MARY  
Address: 5637 TURTLE BAY DR #15  
City-St-Zip: NAPLES, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: TD (X) Change ( ) Addition  
Name: VIETS, BILL  
Address: 24 HOLBROOK ROAD  
City-St-Zip: SOUTH BURLINGTON, VT 05403

Title: D (X) Change ( ) Addition  
Name: PENNETTA, ARTHUR  
Address: 5635 TURTLE BAY, DR 9  
City-St-Zip: NAPLES, FL 34105

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 for the exemption stated in Section 119.07(3)(i), 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: ANTHONY FERRARI

P

04/29/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date