

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33194

FILED  
Jan 16, 2012  
Secretary of State

**Entity Name:** THE VILLAGES OF EMERALD BAY CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

422 EMERALD BAY CIRCLE  
NAPLES, FL 34110 US

**New Principal Place of Business:**

**Current Mailing Address:**

14975 LAKEHOUSE LANE  
NAPLES, FL 34110

**New Mailing Address:**

**FEI Number:** 65-0128495

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JOHN C JOANIDES CPA, P.A.  
7345 DAVIS BLD  
SUITE #2  
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: PRES  
Name: MACKEN, RICHARD  
Address: 356 EMERALD BAY CIRCLE P-8  
City-St-Zip: NAPLES, FL 34110

Title: VP  
Name: HARRINGTON, CAROL A  
Address: 337 EMERALD BAY CIRCLE U-2  
City-St-Zip: NAPLES, FL 34110

Title: TREA  
Name: HULL, JOHN T  
Address: 331 EMERALD BAY CIRCLE V-3  
City-St-Zip: NAPLES, FL 34110

Title: SEC  
Name: CRESSY, DAVID A  
Address: 306 EMERALD BAY CIRCLE J-7  
City-St-Zip: NAPLES, FL 34110

Title: DIR  
Name: SOLIWODA, RAYMOND  
Address: 351 EMERALD BAY CIRCLE R-1  
City-St-Zip: NAPLES, FL 34110

I hereby 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 all other like empowered.

SIGNATURE: JOHN T HULL

TREA

01/16/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date