2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2011
Secretary of State

DOCUMENT# N33556

Entity Name: MONTCLAIR AT AUDUBON CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O MELDON CONSULTANTS
4949 TAMIAMI TRAIL N.
NAPLES, FL 34103 US

New Principal Place of Business:

Current Mailing Address:

C/O MELDON CONSULTANTS
4949 TAMIAMI TRAIL N. #201
NAPLES, FL 34103 US

New Mailing Address:

FEI Number: 65-0140748 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MOORE, WILLIAM S
4949 TAMIAMI TRAIL N.
SUITE #201
NAPLES, FL 34103 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: D
Name: RIEGER, KATHERINE
Address: 591 AUDUBON BLVD #102
City-St-Zip: NAPLES, FL 34110

Title: TD
Name: NAVRATIL, ROBERT
Address: 567 AUDUBON BLVD # 201
City-St-Zip: NAPLES, FL 34110

Title: SD
Name: VICKS, MARY H
Address: 599 AUDUBON BLVD #301
City-St-Zip: NAPLES, FL 34110

Title: VPD
Name: WENNER, HARDY
Address: 9 STEEPLECHASE ROAD
City-St-Zip: BARRINGTON, IL 60010

Title: PD
Name: MORRISSEY, KEVIN
Address: 551 AUDUBON BLVD. #202
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: KEVIN MORRISSEY PD 04/25/2011
Electronic Signature of Signing Officer or Director Date