## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33557

FILED Apr 25, 2005 Secretary of State

Entity Name: DEVON GREEN AT AUDUBON RESIDENTS' ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

**DEVON GREEN LANE** NAPLES, FL 34110

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 110156 P.O. BOX 110339 NAPLES, FL 34108 NAPLES, FL 34108

FEI Number: 65-0140746 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

PROFESSIONAL COMMUNITY SERVICES KUETER, BEVERLY 2310 DELLA DR C/O SUNBURST MGMT. NAPLES, FL 34117 US 4306 ARNOLD AVE NAPLES, FL 34104 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: BEVERLY KUETER

04/25/2005 Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete BLACKBURN, FAY BLACKBURN, KAY Name: Name:

13208 DOWN GREEN LANE Address: 15268 DEVON GREEN LANE Address: City-St-Zip: NAPLES, FL 34110 City-St-Zip: NAPLES, FL 34110

Title: Title: (X) Change ( ) Addition ( ) Delete

FOX, GARY Name: FOX, GARY Name:

Address: 15272 DOWN GREEN LANE Address: 15272 DOWN GREEN LANE City-St-Zip: NAPLES, FL 34110 City-St-Zip: NAPLES, FL 34110

Title: MS () Delete Title: (X) Change ( ) Addition

WHITE, WILLIAM CITTADINE, JACK Name: Name: 15284 DEVON GREEN LANE Address: 2310 DELLA DR Address:

City-St-Zip: NAPLES, FL 34117 City-St-Zip: NAPLES, FL 34110

Title: DVP (X) Delete Title: () Change () Addition

Name: CORMACK, BOB Name: 15259 DEVON GREEN LANE Address: Address: City-St-Zip: NAPLES, FL 34110 City-St-Zip:

Title: DΡ (X) Delete Title: () Change () Addition

MARSHALL, KEN Name: Name: 821 S. BERNISTON Address: Address: City-St-Zip: SAINT LOUIS, MO 63105 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: JACK CITTADINE D/T 04/25/2005