2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40010

FILED Jan 23, 2009 Secretary of State

Entity Name: JAMESTOWN RESIDENTS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 725 JAMESTOWN LN 5435 JAEGER ROAD #4 NAPLES, FL 34108 NAPLES, FL 34109 **Current Mailing Address: New Mailing Address:** COLLIER FINANCIAL, INC. 5435 JAEGER ROAD #4 4985 TAMIAMI TRAIL E. NAPLES, FL 34109 US NAPLES, FL 34113 FEI Number: 65-0222696 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: BOUCHER, ROGER NEWELL, WILLIAM A 5435 JAEGER ROAD #4 108TH AVENUE NORTH NAPLES, FL 34108 NAPLES, FL 34109 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: WILLIAM A NEWELL, AGENT 01/23/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete DIX, STEVEN Name: Name: 12559 CONWAY RD Address: Address: City-St-Zip: SAINT LOUIS, MO 63141 City-St-Zip: Title: SD (X) Delete Title: () Change () Addition Name: DROBIS, DAVID Name: Address: 685 JAMESTOWN LN Address: City-St-Zip: NAPLES, FL 34108 City-St-Zip: Title: () Delete Title: (X) Change () Addition KIPTYK, SHARON Name: KIPTYK, SHARON Name: 741 JAMESTOWN LANE 741 JAMESTOWN LANE Address: Address: City-St-Zip: NAPLES, FL 34108 City-St-Zip: NAPLES, FL 34108 () Delete Title: PD Title: () Change () Addition BLUMBERG, DON Name: Name: Address: 701 JAMESTOWN LANE Address: City-St-Zip: NAPLES, FL 34108 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: DON BLUMBERG PD 01/23/2009