

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42517

FILED
Apr 22, 2009
Secretary of State

Entity Name: VANDERBILT OFFICE PARK OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

3960 VIA DEL REY
BONITA SPRINGS, FL 34134 US

New Principal Place of Business:

Current Mailing Address:

3960 VIA DEL REY
BONITA SPRINGS, FL 34134 US

New Mailing Address:

FEI Number: 65-0260941

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DESALVO, A.P.
3960 VIA DEL REY
BONITA SPRINGS, FL 34134 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: PD () Delete
Name: MINOR, Q. GRADY
Address: 3800 VIA DEL RAY
City-St-Zip: BONITA SPRINGS, FL

Title: PD () Delete
Name: DESALVO, A P
Address: 3960 VIA DEL REY
City-St-Zip: BONITA SPRINGS, FL

Title: TD () Delete
Name: DEEVERS, CHERYL
Address: 3920 VIA DEL REY #4
City-St-Zip: BONITA SPRINGS, FL 34134

Title: SD () Delete
Name: MULLER, SUSAN
Address: 8870 EMERALD ISLE #103
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D () Delete
Name: SULTAN, KELLI
Address: 8870 EMERALD ISLE #103
City-St-Zip: BONITA SPRINGS, FL 34135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: CHERYL L. DEEVERS

D

04/22/2009

Electronic Signature of Signing Officer or Director

Date