

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44423

FILED
Apr 17, 2009
Secretary of State

Entity Name: CORINTHIAN GARDENS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4802 AIRPORT ROAD
NAPLES, FL 34105 US

New Principal Place of Business:

Current Mailing Address:

4802 AIRPORT ROAD
NAPLES, FL 34105 US

New Mailing Address:

FEI Number: 65-0410729

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WORLD TENNIS CLUB, INC.
4802 AIRPORT ROAD
NAPLES, FL 34105 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: TSD () Delete
Name: SCHELLER, STEVE
Address: PO BOX 237
City-St-Zip: ENGLEWOOD, FL 34295

Title: VD () Delete
Name: NICHOLSON, JUDI
Address: 4761 OBERON CT.
City-St-Zip: NAPLES, FL 34105

Title: D () Delete
Name: SUAREZ, RAMON
Address: 3579 MIDAS PLACE
City-St-Zip: NAPLES, FL 34105

Title: D () Delete
Name: SIMONO, JERRY
Address: 3544 CORINTHIAN WAY
City-St-Zip: NAPLES, FL 34105

Title: PD () Delete
Name: CAMP, BILL
Address: 3556 CORINTHIAN WAY
City-St-Zip: NAPLES, FL 34105

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: SLOZIL, SHARON
Address: 4799 GANYMEDE COURT
City-St-Zip: NAPLES, FL 34105

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

Title: D (X) Change () Addition
Name: RINCON, ALVARO
Address: 3565 CORINTHIAN WAY
City-St-Zip: NAPLES, FL 34105

Title: TD (X) Change () Addition
Name: KAPLOWICZ, HARVEY
Address: 3540 CORINTHIAN WAY
City-St-Zip: NAPLES, FL 34105

Title: PD (X) Change () Addition
Name: VERNON, JOYCE
Address: 3571 MIDAS PLACE
City-St-Zip: NAPLES, FL 34105

Title: AT () Change (X) Addition
Name: LOSCHIAVO, ETHAN
Address: 4802 AIRPORT ROAD
City-St-Zip: NAPLES, FL 34105

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: JOYCE VERNON

PD

04/17/2009

Electronic Signature of Signing Officer or Director

Date