2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49222

Apr 30, 2009 Secretary of State

Entity Name: THE VERANDAS AT LELY FLAMINGO ISLAND CLUB CONDOMINIUM I ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business:

TIGER COVE NAPLES, FL 34113

3701 TAMIAMI TRAIL N. 3RD FLOOR US

NAPLES, FL 34103

Current Mailing Address:

New Mailing Address:

C/O COMPASS GROUP 7400 TAMIAMI TRAIL N #101 3701 TAMIAMI TRAIL N. 3RD FLOOR

NAPLES, FL 34103

NAPLES, FL 34108 FEI Number: 65-0356425

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:

COMPASS GROUP

7400 TAMIAMI TRAIL N STE 101 NAPLES, FL 34108

COMPASS GROUP

3701 TAMIAMI TRAIL N, 3RD FLOOR

NAPLES, FL 34103

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: JEFF MITCHELL

04/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PD () Delete

BERLET, RONALD Name:

RR #1 Address:

City-St-Zip: BATH, ON K0H 1G0 CA

Title: VPD () Delete STEELE, EUGENIA Name:

Address: 6969 S BETSIE RIVER RD City-St-Zip: INTERLOCHEN, MI 49843

Title: VΡ () Delete

NESTOR, MARTIN Name: Address: PO BOX 102

City-St-Zip: POINT LOOKOUT, NY 11569

Title: (X) Delete

Name: TINGLEY, THOMAS 8015 TIGER COVE #202 Address: City-St-Zip: NAPLES, FL 34113

Title: (X) Delete RHODES, STEPHANIE Name:

8025 TIGER COVE #304 Address: City-St-Zip: NAPLES, FL 34113

(X) Change () Addition

BERLET, RONALD Name: Address: 8025 TIGER COVE #306 City-St-Zip: NAPLES, FL 34113

Title: (X) Change () Addition

Name: RHODES, STEPHANIE Address: 8025 TIGER COVE #304 City-St-Zip: NAPLES, FL 34113

Title: (X) Change () Addition

TINGLEY, THOMAS Name: 8025 TIGER COVE #202 Address: City-St-Zip: NAPLES, FL 34113

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: RON BERLET Ρ 04/30/2009