2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000657

FILED Apr 10, 2009 Secretary of State

Entity Name: THE VILLAGES AT EMERALD LAKES FOUR CONDOMINIUM ASSOCIATION, INC.

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

%GUARDIAN PROPERTY MANAGEMENT 6700 LONE OAK BLVD NAPLES, FL 34109 US

Current Mailing Address: New Mailing Address:

6700 LONE OAK BLVD NAPLES, FL 34109 US

FEI Number: 65-0364595 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:

ROSS, BYRON
6700 LONE OAK BLVD
NAPLES, FL 34109 US
GUARDIAN PROPERTY MANAGEMENT
6700 LONE OAK BLVD
NAPLES, FL 34109 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: BYRON ROSS 04/10/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: P () Delete Title: () Change () Addition

 Name:
 PROUTY, ROBERT
 Name:

 Address:
 7719 JEW LANE, #104
 Address:

 City-St-Zip:
 NAPLES, FL 34109
 City-St-Zip:

Title: VP () Delete Title: () Change () Addition

 Name:
 ROSER, JOAN
 Name:

 Address:
 7731 JEWEL LANE, #104
 Address:

 City-St-Zip:
 NAPLES, FL 34109
 City-St-Zip:

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

 Name:
 MODUGNO, DONNA
 Name:
 MULKERRIN, MORGAN

 Address:
 7731 JEWEL LANE, #103
 Address:
 7737 JEWEL LANE, #101

 City-St-Zip:
 NAPLES, FL 34109
 City-St-Zip:
 NAPLES, FL 34109

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: BYRON ROSS MGR 04/10/2009