

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004175

FILED
Apr 20, 2011
Secretary of State

Entity Name: WATERPARK PLACE VILLAGE ASSOCIATION, INC.

Current Principal Place of Business:

CARDINAL MGMT. GROUP, S. FLORIDA INC
5067 TAMiami T RAIL EAST
NAPLES, FL 34113 US

New Principal Place of Business:

4670 CARDINAL WAY
SUITE 302
NAPLES, FL 34112 US

Current Mailing Address:

CARDINAL MGMT. GROUP, S. FLORIDA INC
5067 TAMiami T RAIL EAST
NAPLES, FL 34113 US

New Mailing Address:

4670 CARDINAL WAY
SUITE 302
NAPLES, FL 34112 US

FEI Number: 65-0438867

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WOODWARD, MARK J
3200 TAMiami TRAIL NORTH
SUITE 200
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

CARDINAL MANAGEMENT GROUP OF FLORIDA, INC.
4670 CARDINAL WAY
SUITE 302
NAPLES, FL 34112 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: CARDINAL MANAGEMENT GROUP OF FLORIDA, INC.

04/20/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: DINARDO, ANTHONY
Address: 8156 FIDDLER'S CREEK PKWY
City-St-Zip: NAPLES, FL 34114

Title: D
Name: PARISI, JOSEPH L.
Address: 8156 FIDDLER'S CREEK PKWY
City-St-Zip: NAPLES, FL 34114

Title: D
Name: WOODWARD, MARK J
Address: 3200 TAMiami TRAIL NORTH STE 200
City-St-Zip: NAPLES, FL 34103

Title: P
Name: SUZIEDELIS, VITO
Address: 6849 GRENADIER BLVD #PH-5
City-St-Zip: NAPLES, FL 34108

Title: P
Name: MACCHI, LEONOR
Address: 6825 GRENADIER BLVD. #505
City-St-Zip: NAPLES, FL 34108

Title: V
Name: BERGER, MYRON
Address: 6849 GRENADIER BLVD #1901
City-St-Zip: NAPLES, FL 34108

I hereby 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 all other like empowered.

SIGNATURE: VITO SUZIEDELIS

PRES

04/20/2011

Electronic Signature of Signing Officer or Director

Date