

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002477

FILED
Apr 15, 2009
Secretary of State

Entity Name: LAGUNA ROYALE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O RESORT MANAGEMENT
2685 HORSESHOE DR SOUTH #215
NAPLES, FL 34104 US

New Principal Place of Business:

Current Mailing Address:

C/O RESORT MANAGEMENT
2685 HORESHOE DR SOUTH #215
NAPLES, FL 34104 US

New Mailing Address:

FEI Number: 65-0504780

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ORLOVE, WILL
574 LAGUNA ROYAL BLVD #703
NAPLES, FL 34119 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: VP () Delete
Name: WALTER, MARLOWE
Address: 538 LOGUNA ROYALE BLVD. #401
City-St-Zip: NAPLES, FL 34119

Title: SD () Delete
Name: ROSENTHAL, FRANK
Address: 598 LAGUNA ROYALE BLVD. # 903
City-St-Zip: NAPLES, FL 34119

Title: PD () Delete
Name: ORLOVE, WILL
Address: 574 LAGUNA ROYALE BLVD. # 703
City-St-Zip: NAPLES, FL 34119

Title: TD () Delete
Name: KATZAN, PHILIP
Address: 526 LAGUNA ROYALE BLVD #301
City-St-Zip: NAPLES, FL 34119

Title: D () Delete
Name: VALENTINE, ROBERT
Address: 562 LAGUNA ROYAL BL. #63
City-St-Zip: NAPLES, FL 34119

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: ROSENTHAL, FRANK
Address: 598 LAGUNA ROYALE BLVD. # 903
City-St-Zip: NAPLES, FL 34119

Title: P (X) Change () Addition
Name: ORLOVE, WILL
Address: 574 LAGUNA ROYALE BLVD. # 703
City-St-Zip: NAPLES, FL 34119

Title: T (X) Change () Addition
Name: KATZAN, PHILIP
Address: 526 LAGUNA ROYALE BLVD #301
City-St-Zip: NAPLES, FL 34119

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: WILLIAM ORLOVE

P

04/15/2009

Electronic Signature of Signing Officer or Director

Date