


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90555 025 ****61.25

DOCUMENT # N94000006032 1. Entity Name TIERRA LAGO NEIGHBORHOOD ASSOCIATION, INC.					
Principal Place of Business 2685 HORSESHOE DR S., #215 RESORT MGMNT NAPLES, FL 34104 US			Mailing Address RESORT MANAGEMENT 2685 S. HORSESHOE DR. STE 215 NAPLES, FL 34104 US		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 65-0574840	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent WERNES, MICHAEL 1013 TIERRA LUGO WAY NAPLES, FL 34119				7. Name and Address of New Registered Agent Name <u>Michael Werner</u> Street Address (P.O. Box Number is Not Acceptable) <u>1013 Tierra Lago Way</u> City <u>Naples</u> <u>FL</u> Zip Code <u>34119</u>	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD WERNER, MICHAEL 1013 TIERRA LUGO WY NAPLES, FL 34119	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	Werner, Michael 1013 Tierra Lago Way Naples, FL 34119
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD HOLBROOKS, SAMUEL 1009 TIERRA LUGO WAY NAPLES, FL 34119	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	Holbrooks, Samuel 1009 Tierra Lago Way Naples, FL 34119
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BERRETH, RAYMOND 989 TIERRA LAGO WAY NAPLES, FL 34119	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	[Blank]
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD ROACH, JOHN 957 TIERRAE LAGO WAY NAPLES, FL 34119	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP Roach, Jack 957 Tierra Lago Way Naples, FL 34119
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FEDOR, ANTHONY 905 TIERRA LUGO WAY NAPLES, FL 34119	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	Fedor, Anthony 905 Tierra Lago Way Naples, FL 34119
TITLE NAME STREET ADDRESS CITY - ST - ZIP	[Blank]	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	[Blank]
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Michael Werner, Pres.</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Date <u>4/27/05</u> <small>Daytime Phone #</small>	

14015326



04142005 Chg-NP CR2E037 (10/03)