

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001003

FILED
Apr 30, 2009
Secretary of State

Entity Name: THE NORTH GROVES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2480 OLD GROVES RD
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

2480 OLD GROVES RD
NAPLES, FL 34109 US

New Mailing Address:

FEI Number: 65-0567085

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GEDE P.A., JOHN C
999 VANDERBILT BEACH ROAD
SUITE 501
NAPLES, FL 34108 US

Name and Address of New Registered Agent:

COMPASS GROUP
3701 TAMiami TRAIL N, 3RD FLOOR
NAPLES, FL 34103 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: JEFF MITCHELL

04/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DAVENPORT, HADDON
Address: 7505 SILVER TRUMPET #202
City-St-Zip: NAPLES, FL 34109

Title: VPD () Delete
Name: SABIA, ANGELO
Address: 7576 OLEANDER GATE DRIVE D102
City-St-Zip: NAPLES, FL 34109

Title: SD () Delete
Name: WEINTHALER, DICK
Address: 2565 OLD GROVES RD #204
City-St-Zip: NAPLES, FL 34109

Title: TD () Delete
Name: DAVENPORT, HADDEN
Address: 2585 OLD GROVES RD L#102
City-St-Zip: NAPLES, FL 34109

Title: D (X) Delete
Name: WEISBERG, RICHARD
Address: 7505 SILVER TRUMPET #203
City-St-Zip: NAPLES, FL 34109

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: DAVENPORT, HADDON
Address: 7505 SILVER TRUMPET #202
City-St-Zip: NAPLES, FL 34109

Title: P (X) Change () Addition
Name: VICKERS, JIM
Address: 7505 SILVER TRUMPET CT #202
City-St-Zip: NAPLES, FL 34109

Title: 1VP (X) Change () Addition
Name: WEINTHALER, RICHARD
Address: 2565 OLD GROVES RD #204
City-St-Zip: NAPLES, FL 34109

Title: 2VP (X) Change () Addition
Name: ANDERSON, JOHN
Address: 7528 OLEANDER GATE DRIVE #101
City-St-Zip: NAPLES, FL 34109

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: JIM VICKERS

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date