2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000006031

FILED Apr 15, 2009 Secretary of State

Entity Name: FOUNTAINHEAD AT THE VINEYARDS HOMEOWNERS ASSOCIATION, INC.

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

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

Current Mailing Address: New Mailing Address:

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

FEI Number: 65-0641124 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:

RUSKIN, KENNETH M
136 APRIL SOUND DR.
NAPLES, FL 34119 US

ATTAWAY, RILLA
927 FOUNTAIN RUN
NAPLES, FL 34119 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: RILLA ATTAWAY 04/15/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Address:

City-St-Zip:

955 FOUNTAIN RUN

NAPLES, FL 34119

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition WALTERS, GEORGE COHN, BUZZ Name: Name: 140 APRIL SOUND DRIVE Address: 990 FOUNTAIN RUN Address: City-St-Zip: NAPLES, FL 34119 City-St-Zip: NAPLES, FL 34119 Title: Title: (X) Change () Addition () Delete ATTAWAY, RILLA Name: ATTAWAY, RILLA Name: Address: 927 FOUNTAIN RUN Address: 927 FOUNTAIN RUN City-St-Zip: NAPLES, FL 34119 City-St-Zip: NAPLES, FL 34119 Title: () Delete Title: (X) Change () Addition RUSKIN, KENNETH M SPAHL, JACQUELINE Name: Name: 136 APRIL SOUND DR. 1030 FOUNTAIN RUN Address: Address: City-St-Zip: NAPLES, FL 34119 City-St-Zip: NAPLES, FL 34119 Title: DS () Delete Title: (X) Change () Addition Name: NUGENT, RAYMOND Name: NUGENT, RAYMOND 143 APRIL SOUND DRIVE Address: 143 APRIL SOUND DRIVE Address: City-St-Zip: NAPLES, FL 34119 City-St-Zip: NAPLES, FL 34119 Title: () Delete Title: (X) Change () Addition DUSEK, ROBERTA DUSEK, ROBERTA Name: Name: 963 FOUNTAIN RUN 963 FOUNTAIN RUN Address: Address: City-St-Zip: NAPLES, FL 34119 City-St-Zip: NAPLES, FL 34119 Title: () Delete Title: () Change () Addition REYNOLDS, GAIL Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: RILLA ATTAWAY P 04/15/2009