

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000259

FILED  
Apr 15, 2009  
Secretary of State

**Entity Name:** NORTSHORE LAKE VILLAS NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

606 CAPT'N KATE CT  
NAPLES, FL 34110 US

**New Principal Place of Business:**

**Current Mailing Address:**

3400 TAMIAMI TRL N #302  
NAPLES, FL 34103

**New Mailing Address:**

**FEI Number:** 59-3438124

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GAFFNEY, KEVIN  
3400 TAMIAMI TRL N #302  
NAPLES, FL 34103 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: P ( ) Delete  
Name: BARTON, JERRY  
Address: 717 CAPT'N KATE CRT  
City-St-Zip: NAPLES, FL 34110

Title: VP ( ) Delete  
Name: CLAUBIO, ALBANI  
Address: 950 MIDDLEBURY ROAD  
City-St-Zip: WATERTOWN, CT 06795

Title: S ( ) Delete  
Name: BALDINO, LISA  
Address: 622 CAPT'N KATE CRT  
City-St-Zip: NAPLES, FL 34110

Title: T ( ) Delete  
Name: HANSEN, WILL  
Address: 4 EMILEY CIR  
City-St-Zip: MEREDITH, NH 03253

Title: VD ( ) Delete  
Name: MAGLIONE, BOBBY  
Address: 522 CAPTAIN KATE CT  
City-St-Zip: NAPLES, FL 34110

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VP (X) Change ( ) Addition  
Name: ALBINI, CLAUDE  
Address: 950 MIDDLEBURY ROAD  
City-St-Zip: WATERTOWN, CT 06795

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

Title: T (X) Change ( ) Addition  
Name: LAMSON, LARRY  
Address: 136 MAIN ST. P.O. BOX1130  
City-St-Zip: PRINCE FREDERICK, MD 20678

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: JERRY BARTON

P

04/15/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date