

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 17, 2009  
Secretary of State**

DOCUMENT# N96000003210

Entity Name: VERANDA I AT SOUTHERN LINKS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O R&P PROPERTY MANAGEMENT  
265 AIRPORT ROAD SOUTH  
NAPLES, FL 34104 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O R&P PROPERTY MANAGEMENT  
265 AIRPORT ROAD SOUTH  
NAPLES, FL 34104 US

**New Mailing Address:**

FEI Number: 65-0680740      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

R&P PROPERTY MANAGEMENT  
265 AIRPORT ROAD SOUTH  
NAPLES, FL 34104 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: PD ( ) Delete  
Name: WARNOCK, LYLE  
Address: 8580 NAPLES HERITAGE DRIVE #616  
City-St-Zip: NAPLES, FL 34112

Title: VPD ( ) Delete  
Name: ASIALA, PHILIP  
Address: 8600 NAPLES HERITAGE DR #523  
City-St-Zip: NAPLES, FL 34112

Title: SD ( ) Delete  
Name: PULKOWNIK, LAWRENCE  
Address: 8540 NAPLES HERITAGE DR. #813  
City-St-Zip: NAPLES, FL 34112

Title: TD ( ) Delete  
Name: WESTFALL, ROBERT  
Address: 8555 NAPLES HERITAGE DR. #224  
City-St-Zip: NAPLES, FL 34112

Title: D ( ) Delete  
Name: LOVEDALE, ROGER  
Address: 8580 NAPLES HERITAGE DR, #621  
City-St-Zip: NAPLES, FL 34112

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

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

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

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

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

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: LYLE WARNOCK

PD

04/17/2009

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

\_\_\_\_\_  
Date