

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003540

FILED  
Apr 27, 2009  
Secretary of State

Entity Name: CALUSA BAY MASTER ASSOCIATION, INC.

## Current Principal Place of Business:

6955 SATINLEAF RD N  
NAPLES, FL 34109

## New Principal Place of Business:

## Current Mailing Address:

6955 SATINLEAF RD N  
NAPLES, FL 34109

## New Mailing Address:

FEI Number: 65-0682595

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SWILLIN & SOBELMAN P A  
1250 TAMiami TRAIL NORTH  
SUITE #211  
NAPLES, FL 34102 US

## Name and Address of New Registered Agent:

SCULLIN & SOBELMAN P A  
1250 TAMiami TRAIL NORTH  
SUITE #302  
NAPLES, FL 34102 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: SCULLIN & SOBELMAN, PA

04/27/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: T ( ) Delete  
Name: CARIOSCIA, PETER  
Address: 6887 REDBAY PARK RD 102  
City-St-Zip: NAPLES, FL 34109

Title: VP ( ) Delete  
Name: SITTENFELD, CURTIS  
Address: 6800 SATIN LEAF ROAD, SOUTH #104  
City-St-Zip: NAPLES, FL 34109

Title: S ( ) Delete  
Name: BROCHARD, HILDA  
Address: 6867 SATINLEAF DR S 203  
City-St-Zip: NAPLES, FL 34109

Title: D ( ) Delete  
Name: MORGAN, SUSAN  
Address: 6914 SATIN LEAF ROAD NORTH, #102  
City-St-Zip: NAPLES, FL 34109

Title: P ( ) Delete  
Name: GIBBONS, GARY  
Address: 6922 SATINLEAF RD. NORTH #102  
City-St-Zip: NAPLES, FL 34109

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change ( ) Addition  
Name: BLOOM, DAVID  
Address: 6922 SATINLEAF ROAD NORTH #203  
City-St-Zip: NAPLES, FL 34109

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

Title: D (X) Change ( ) Addition  
Name: DIMENNA, GENE  
Address: 6899 RAINLILY ROAD # 103  
City-St-Zip: NAPLES, FL 34109

Title: D (X) Change ( ) Addition  
Name: TRUSTEM, GLENN  
Address: 6899 RAINLILY ROAD #201  
City-St-Zip: NAPLES, FL 34109

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

Title: D ( ) Change (X) Addition  
Name: JOUANNET, SHERRY  
Address: 6839 LANTANA BRIDGE ROAD #103  
City-St-Zip: NAPLES, FL 34109

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: GARY GIBBONS

PRES

04/27/2009

Electronic Signature of Signing Officer or Director

Date