2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000719

FILED Apr 26, 2011 Secretary of State

Entity Name: INDIAN WELLS GOLF VILLAS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business:

C/O RESORT MANAGEMENT

C/O RESORT MGMT 2685 HORSESHOEDR SOUTH SUITE 215

2685 HORSESHOE DR SOUTH SUITE 215

NAPLES, FL 34104 US NAPLES, FL 34104

New Mailing Address:

C/O RESORT MGMT

Current Mailing Address:

C/O RESORT MANAGEMENT

2685 HORSESHOEDR SOUTH SUITE 215 NAPLES, FL 34104 US 2685 HORSESHOE DR SOUTH SUITE 215

NAPLES, FL 34104 US

FEI Number: 59-3453701

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:

TORBA, JAMES 8380 INDIAN WELLS WAY NAPLES, FL 34113 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TS

 Name:
 PUCCIO, ANTHONY

 Address:
 8477 INDIAN WELLS WAY

 City-St-Zip:
 NAPLES, FL 34113

Title: F

Name: TORBA, JAMES

Address: 8380 INDIAN WELLS WAY
City-St-Zip: NAPLES, FL 34113

Title: VP

 Name:
 CATERINO, LORRAINE

 Address:
 8460 INDIAN WELLS WAY

 City-St-Zip:
 NAPLES, FL 34113

I hereby 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 all other like empowered.

SIGNATURE: JAMES TORBA P 04/26/2011