

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000976

FILED  
Jan 11, 2006  
Secretary of State

**Entity Name:** THE VILLAS AT KILKENNY ASSOCIATION, INC.

**Current Principal Place of Business:**

5435 JAEGER RD #4  
NAPLES, FL 34109

**New Principal Place of Business:**

**Current Mailing Address:**

5435 JAEGER RD #4  
NAPLES, FL 34109

**New Mailing Address:**

**FEI Number:** 65-0764610

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NEWELL, WILLIAM  
5435 JAEGER RD #4  
NAPLES, FL 34109 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: LEONHARD, RICHARD  
Address: 7940 KILKENNY WAY  
City-St-Zip: NAPLES, FL 34112

Title: VD ( ) Delete  
Name: WHITAKER, CECIL  
Address: 7915 KILKENNY WAY  
City-St-Zip: NAPLES, FL 34112

Title: STD ( ) Delete  
Name: LADRIGAN, PATRICIA  
Address: 7955 KILKENNY WAY  
City-St-Zip: NAPLES, FL 34112

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

Title: PD (X) Change ( ) Addition  
Name: WHITAKER, CECIL  
Address: 7915 KILKENNY WAY  
City-St-Zip: NAPLES, FL 34112

Title: VD (X) Change ( ) Addition  
Name: GEOTIS, GEORGE  
Address: 8015 KILKENNY WAY  
City-St-Zip: NAPLES, FL 34112

Title: STD (X) Change ( ) Addition  
Name: SALATER, RUTH A  
Address: 7919 KILKENNY WAY  
City-St-Zip: NAPLES, FL 34112

I hereby certify that the information supplied with this filing does not qualify for the 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: CECIL WHITAKER

PD

01/11/2006

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

\_\_\_\_\_  
Date