

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005890

FILED
Apr 26, 2005
Secretary of State

Entity Name: ROSEWOOD POINTE GARDENS COMMONS ASSOCIATION, INC.

Current Principal Place of Business:

5020 TAMIAMI TRAIL NORTH
116
NAPLES, FL 34103 US

New Principal Place of Business:

6312 TRAIL BLVD.
NAPLES, FL 34108 US

Current Mailing Address:

5020 TAMIAMI TRAIL NORTH
116
NAPLES, FL 34103 US

New Mailing Address:

6312 TRAIL BLVD.
NAPLES, FL 34108 US

FEI Number: 59-3495155

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MULLERSMAN, STEVEN J
2190 J&C BLVD
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

LIVELY, DENNIS F
6312 TRAIL BLVD.
NAPLES, FL 34108 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: DENNIS F. LIVELY

04/26/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MULLERSMAN, STEVEN J
Address: 2190 J&C BLVD
City-St-Zip: NAPLES, FL 34109 US

Title: VTD () Delete
Name: MARTENY, NELSON K
Address: 2190 J&C BLVD
City-St-Zip: NAPLES, FL 34109 US

Title: SD () Delete
Name: DIAZ, MARIA T
Address: 2190 J&C BLVD
City-St-Zip: NAPLES, FL 34109 US

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: STEVEN MULLERSMAN

P

04/26/2005

Electronic Signature of Signing Officer or Director

Date