## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 27, 2006 8:00 am

	ANNOAL	_ 56	Secretary of State						
DOCUMENT # N9700006581  1. Entity Name PROVENCE OF NAPLES CONDOMINIUM ASSOCIATIO INC.			۷,			00197 027 ****61			
Principal Place of Business 4151 GULF SHORE BLVD N NAPLES, FL 34103		Mailing Address 4151 GULF SHORE BLVI NAPLES, FL 34103	D N	A LOGINION BIO LOUI	66998	88111 <b>2</b> 8118 91181 9139; (859) (17	87181 BJ (884		
2. Principal Place of Business		3. Mailing Address							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		03202006 <sub>C</sub>	hg-NP	CR2E037 (11/05)			
City & Stat	:0	City & State	City & State		)7	<del></del>	oplied For of Applicable		
Zip	Country	Zip	Country	5. Certificate of St	tatus Desired	\$8.75 Add	ditional		
<u> </u>	6. Name and Address of Current	Registered Agent		7. Name and Add	iress of New Re	gistered Agent			
WYNN, AF			Name						
4151 GULI NAPLES, I	F SHORE BLVD N FL 34103		Street Addres	ss (P.O. Box Number is	Not Acceptable)	· · · · · · · · · · · · · · · · · · ·			
			Oib.	<del></del>					
			City			FL Zip Code			
the obligat	named entity submits this statement for tions of registered agent.	f the purpose of changing its r	egistered office or regis	stered agent, or both, in	the State of Flore	ida. I am familiar with,	and accept		
			SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required vi						
SIGNATURE .		and title if applicable (NOTE	Registered Agent signature requ	uired when reinstating)		DATE			
SIGNATURE .		9. Election Carry Trust Fund Co	paign Financing	\$5.00 May Be Added to Fees		DATE ike check payable to da Department of St			
SIGNATURE	Signature, typed or printed name of registered agent of Filling Fee is \$61.25	9. Election Camp Trust Fund Co	paign Financing	\$5.00 May Be Added to Fees	Floric	ke check payable to	tate		
	Signature, typed or printed name of registered agents Filling Fee is \$61.25 Due by May 1, 2006	9. Election Camp Trust Fund Co	paign Financing ontribution.	\$5.00 May Be Added to Fees ADDITIONS/CHANG PD 1836 H. RI 51 GULF	Floric ES TO OFFICER CShard SHORE	the check payable to da Department of St S AND DIRECTORS IN Change	tate		
10. HITLE NAME STREET ADDRESS	Filling Fee is \$61.25 Due by May 1, 2006  OFFICERS AND DIF  D  SULZMANN, BILL  4151 GULF SHORE BV N	9. Election Carny Trust Fund Co	paign Financing ontribution.	\$5.00 May Be Added to Fees ADDITIONS/CHANG	Floric ES TO OFFICER CShard SHORE	the check payable to da Department of St S AND DIRECTORS IN Change	tate I 10		
10. HITLE NAME STREET ADDRESS CITY-ST-ZIP HITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2006  OFFICERS AND DIF  D SULZMANN, BILL 4151 GULF SHORE BV N NAPLES, FL 34103  VPD FLEISCHMAN, PAT 4151 GULF SHORE BV N	9. Election Carry Trust Fund Co	paign Financing ontribution.  11.  III.E  NAME  STREET ADDRESS  CITY-SI-ZIP  DILE  NAME  STREET ADDRESS	\$5.00 May Be Added to Fees ADDITIONS/CHANG PD 1836 H. RI 51 GULF	Floric ES TO OFFICER CShard SHORE	ike check payable to da Department of St S AND DIRECTORS IN Change	1 10 Addition		
HILE NAME STREET ADDRESS CITY-ST-ZIP HILE NAME STREET ADDRESS CITY-ST-ZIP HILE NAME STREET ADDRESS STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2006  OFFICERS AND DIF  D SULZMANN, BILL 4151 GULF SHORE BV N NAPLES, FL 34103  VPD FLEISCHMAN, PAT 4151 GULF SHORE BV N NAPLES, FL 34103  PD HAZELBAKER, RALPH 4151 GULF SHORE BV N	9. Election Carry Trust Fund Co	paign Financing ontribution.  11.  IIILE NAME STREET ADDRESS CITY-ST-ZIP  DILE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP	\$5.00 May Be Added to Fees  ADDITIONS/CHANG PD IRSCH; RI SI GULF JAPLES, F	Floric ES TO OFFICER ICSHARD SHORE (	cke check payable to da Department of St S AND DIRECTORS IN Change	1 10 Addition		
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recept certify that the information supplies with this filling does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under eath, 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

1		٠.	_
,	SIGNATURE		
	SIGNATORE		

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

330-06 (239) 436-3881

ATTACHMENT HOO66998 NOT-FOR-PROFIT CORPORTION #NOT-FOR-PROFIT CORPORTION

2006

10. **DELETE** D MANS, MICHAEL 4151 GULF SHORE BLVD N NAPLES, FL 34103

D **ADDITION** ESPISTO, VIC 4151 GULF SHORE BLVD N NAPLES, FL 34103