

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000743

FILED
May 12, 2009
Secretary of State

Entity Name: NAPLES LAKES COUNTRY CLUB HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4784 INVERNESS CLUB DR.
NAPLES, FL 34112

New Principal Place of Business:

Current Mailing Address:

4784 INVERNESS CLUB DR.
NAPLES, FL 34112

New Mailing Address:

FEI Number: 23-2953983 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BEISLER, JAMES T
4784 INVERNESS CLUB DR.
NAPLES, FL 34112 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: WALSH, DANIEL
Address: 4600 WINGED FOOT WAY 204
City-St-Zip: NAPLES, FL 34112

Title: VPD () Delete
Name: CARMAN, FRANK
Address: 4883 HAMPSHIRE COURT 301
City-St-Zip: NAPLES, FL 34112

Title: SD () Delete
Name: CARDASCIA, CARL
Address: 4884 HAMPSHIRE COURT #104
City-St-Zip: NAPLES, FL 34112

Title: TD () Delete
Name: PALADINO, JOSEPH
Address: 4883 CERROMAR DRIVE
City-St-Zip: NAPLES, FL 34112

Title: D () Delete
Name: DALEY, LEO
Address: 5106 CASTLEROCK WAY
City-St-Zip: NAPLES, FL 34112

Title: D () Delete
Name: ACRISH, WENDY
Address: 4983 SHAKER HEIGHTS COURT #202
City-St-Zip: NAPLES, FL 34112

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change () Addition
Name: HARBRECHT, JOSEPH S
Address: 4834 HAMPSHIRE CT# 107
City-St-Zip: NAPLES, FL 34112

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

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

Title: D (X) Change () Addition
Name: GOULD, WILLIAM D
Address: 4745 SHINNECOCK HILLS CT. #101
City-St-Zip: NAPLES, FL 34112

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: JOSEPH HARBRECHT

S

05/12/2009

Electronic Signature of Signing Officer or Director

Date