2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2011
Secretary of State

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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 ( )**

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
Name: NOVAK, RICHARD
Address: 4970 SHAKER HEIGHTS CT #201
City-St-Zip: NAPLES, FL 34112

Title: VPD
Name: WHALEN, JAY
Address: 5044 CERROMAR DR.
City-St-Zip: NAPLES, FL 34112

Title: SD
Name: GRACE, EDWARD S
Address: 4740 SHINNECOCK HILLS CT #101
City-St-Zip: NAPLES, FL 34112

Title: TD
Name: MOSHER, HOWARD
Address: 4884 HAMPSHIRE CT #106
City-St-Zip: NAPLES, FL 34112

Title: D
Name: DOHERTY, MICHAEL
Address: 4789 CERROMAR DR
City-St-Zip: NAPLES, FL 34112

Title: D
Name: JOHNSON, JAMES
Address: 4695 WINGED FOOT CT #201
City-St-Zip: NAPLES, FL 34112

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: EDWARD GRACE SD 02/25/2011

Electronic Signature of Signing Officer or Director Date