2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED May 11, 2006 8:00 am Secretary of State

05-11-2006 90238 025 ****61.25

DOCUMENT	# N9800000197	5

1. Entity Name
VINEYARDS TERRACINA HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business ADVANCED PROPERTY MGMT Mailing Address ADVANCED PROPERTY MGMT

Advanced Property Management Service, Inc. 1035@Ollier Center Way, #7 Naples, FL 34110 Naples, FL 341	3350 WOOD S EDGE CIRCLE STE 104 BONITA SPRINGS, FL 34134			3350 WOOD S EDGE CIRCLE STE 104 BONITA SPRINGS, FL 34134										
Suignatures Management Service, Inc. 1095@Collier Center Way, #7 Cal 93& Collier Center Way, #7 Naples, FI 34110 Sp-3516620 Not Applicable For Season Special Country Way, #7 Naples, FI 34110 Sp-3516620 Not Applicable For Season Special Country Sp-3516620 Not Applicable For Season Special Country Sp-3516620 Not Applicable For Season Special Country Sp-3516620 Season Sp-3516620 Not Applicable For Season Sp-3516620 Not Applicable For Season Sp-3516620 Not Applicable For Season Sp-3516620 Seaso	Advanced Property			Advar										
Rapiles For Naples College Se. 75 Additional Fee Required Se. 75 Addition	Suite, Apt. (#. etc. gement	Service, Înc.					•	CR2E03	37 (11/05)				
S. Certificate of Status Desired \$8.75 Additional Fee Required Fee R	10355€	ollier (Center Way, #7					F0 0540000						
Name	Zip Na					ntry	1	of Status Desired		\$8.75 Addi	tional			
THOMPSON, SUSAN L ADVANCED PEOPERTY MGGMT 3350 WOODS EDGE CIRCLE STE 104 BONITA SPRINGS, FL 34134 Street Address (P.O. Addwant eth Property Management Service, Inc. City 1035 Collier Center Waps 1 72p Code 1045 Collier Center Waps 1 72p Code 105 Collier Center Waps 1 72p Code 105 Collier Center Waps 1 72p Code 106 Collier Center Waps 1 72p Code 107 Collier Center Waps 1 72p Code 108 Collier Center Waps 1 72p Code 109 Collier Center Waps 1 72p Code 109 Collier Center Waps 1 72p Code 109 Collier Center Waps 1 72p Code 100 Collier Center Waps 1 72	6. Name and Address of Current Registered Agent													
Street Address (P.O. Address (Name								
BONITA SPRINGS, FL 34134 8. The above named egity submits this statement for the purpose of changing its registered diffice or registered agent. SIGNATURE SIGNATURE SIGNATURE Filling Fee is \$61.25 Due by May 1, 2006 9. Election Campsign Financing Trust Fund Contribution. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE PD MAMBLICA, FRANK MAME MAME MAME MAME MAME MAME MAME MASSEY, MARK STREET ADDRESS 415 TERRACINA WAY MAPLES, FL 34119 TITLE DS OPERIOR SOTO OPERIOR SOTO Delde MASSEY, MARK STREET ADDRESS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE DS OPERIOR SOTO MAPLES, FL 34119 Delde MASSEY, MARK STREET ADDRESS AT TERRACINA WAY MAPLES, FL 34119 TITLE DT MAPLES, FL 34119 Delde TITLE DT MAPLES, FL 34119 TITLE DT MAPLES, FL 34119 Delde TITLE DT MAPLES, FL 34119 Delde TITLE DT MAPLES, FL 34119 DELDE DELDE DELDE MAME STREET ADDRESS ADDRESS MAPLES, FL 34119 TITLE DC STREET ADDRESS MAPLES, FL 34119 TITLE DC STREET ADDRESS MAPLES, FL 34119 TITLE DC SALVADORE, GUY STREET ADDRESS MAPLES, FL 34119 TITLE DC SALVADORE, GUY STREET ADDRESS MAPLES, FL 34119 TITLE DC SALVADORE, GUY STREET ADDRESS MAPLES, FL 34119 TITLE DC SALVADORE, GUY STREET ADDRESS MAPLES, FL 34119 TITLE DC SALVADORE, GUY STREET ADDRESS MAPLES, FL 34119 TITLE DC SALVADORE, GUY STREET ADDRESS MAPLES, FL 34119 TITLE DC SALVADORE, GUY STREET ADDRESS MAPLES, FL 34119 TITLE DC SALVADORE, GUY STREET ADDRESS MAPLES, FL 34119 TITLE DC SALVADORE, GUY STREET ADDRESS MAPLES, FL 34119 TITLE DC SALVADORE, GUY STREET ADDRESS MAPLES, FL 34119 TITLE DC SALVADORE, GUY STREET ADDRESS MAPLES, FL 34119 TITLE DC SALVADORE, GUY STREET ADDRESS MARC STREET ADDRESS	ADVANCED PEOPERTY MGGMT					Street Address (P.O. Party Property								
6. The above named egitly submits this statement for the purpose of changing its registered office or registered agent. PDMS. Suff. Seate 3.74d. Diam familiar with, and accept the obligations of printered agent. SIGNATURE SIGNATU								Management Service, Inc.						
SIGNATURE SIGNATURE SUSAN	:					City 1035 Collier Center War #7 Zip Code								
SIGNATURE Signature. Vipidal or protected nature of registrored agent and its // supplication. SUSAN E. THO MANS ENDEST ADDRESS Signature. Vapidal or protected agent and its // supplication. STREET ADDRESS ST. 20														
Filling Fee is \$61.25 9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees Storage Add to Fees Storage Add to Fees Storage Added to Fees Storage Add to Fees	the obligations of registered agent.													
Due by May 1, 2006		Signature, typed	or printed name of registered agent at	nd title if applicable. (NO	TE: Registered	d Agent signature i			DATE					
TITLE						\$3.00 May be								
MAME STREET ADDRESS CITY-ST-ZPP TITLE DVP MASSEY, MARK STREET ADDRESS CITY-ST-ZIP NAPLES, FL 34119 TITLE DS O'DELL, SCOTT NAPLES, FL 34119 TITLE DS O'DELL, SCOTT NAME STREET ADDRESS CITY-ST-ZIP TITLE DT TITLE DT TURE, NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME O'DELL, SCOTT TURE, NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TURNER, ROBERT NAPLES, FL 34119 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DT TURNER, ROBERT NAPLES, FL 34119 TURNER, ROBERT NAPLES, FL 34119 TITLE D D Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP NAPLES, FL 34119 TITLE D D D D DELL SCOTT NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAPLES, FL 34119 TITLE D D D D DELC STREET ADDRESS CITY-ST-ZIP NAPLES, FL 34119 TITLE D D D D D D D D D D D D D D D D D D D	10.		OFFICERS AND DIR	ECTORS	11.		ADDITIONS/CH.	ANGES TO OFFIC	ERS AND DI	RECTORS IN	10			
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NAME TURNER, ROBERT ABDRESS 487 TERRACINA WAY STREET ADDRESS CITY-ST-ZIP NAPLES, FL 34119 CITY-ST-ZIP NAPLES, FL 34119 CITY-ST-ZIP NAME SALVADORE, GUY STREET ADDRESS 482 TERRA VISTA CT STREET ADDRESS CITY-ST-ZIP NAPLES, FL 34119 CITY-ST-ZIP NAPLES, FL 34119 CITY-ST-ZIP NAPLES, FL 34119 CHange Addition Companies City-ST-ZIP NAPLES, FL 34119 Addition Change Change Addition Change Chan	TITLE NAME STREET ADDRESS	DS O'DELL, S 444 TERF	SCOTT RACINA WAY	☐ Delete	TITLE NAM! STRE	E ET ADDRESS	a	-		☐ Change	Addition			
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	NAME STREET ADDRESS	SALVADO 482 TERF	RA VISTA CT	☐ Delete	, NAM STRE	E EET ADDRESS			, 	Change	☐ Addition			
STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP 12. hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information	NAME Street address City-St-Zip	pertify that th	e information supplied with		NAM STRE CITY	E EET ADDRESS -ST-ZIP	itained in Chapter 119). Florida Statutes	I further cer	-	Addition			

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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: