## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000001612

FILED Apr 08, 2009 Secretary of State

Entity Name: REGATTA AT VANDERBILT BEACH COMMONS ASSOCIATION, INC.

		AAA WAADERBIET BEACTTO	CIMINOTAC / NOCCI/ (TTOTA, IIAC.		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
440 LAUNO NAPLES, F	CH CIRCLE FL 34108 (	JS			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
3050 HORS NAPLES, F	SESHOE DR FL 34104 (	N STE 275 JS			
FEI Number:	59-3569454	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of (	Current Registered Agent:	Name and Address of	of New Registered Agent:	
KRAMER TRIAD MANAGMENT GROUP 3050 HORSESHOE DR N NAPLES, FL 34104 US			3050 HORSESHOE D 275	VANDALL, BONITA D 3050 HORSESHOE DR N 275 NAPLES, FL 34104 US	
The above in the State		submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATURE: BONITA VANDALL				04/08/2009	
	Electro	nic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	D ( KAPPEL, RICK 400 FLAGSHIF NAPLES, FL 3	PDR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ( DERMOTT, JO 410 FLAGSHIF NAPLES, FL 3	PDR	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( ZYBLUT, BOB 450 LAUNCH ( NAPLES, FL 3		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	D ( BROWN, DAVE	) Delete	Title: Name:	( ) Change ( ) Addition	

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: RICK KAPPEL PRES 04/08/2009