

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001999

FILED
Apr 24, 2008
Secretary of State

Entity Name: TWIN DOLPHINS I CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O R & P PROPERTY MANAGEMENT
265 AIRPORT RD S
NAPLES, FL 34104 US

New Principal Place of Business:

Current Mailing Address:

C/O R & P PROPERTY MANAGEMENT
265 AIRPORT RD S
NAPLES, FL 34104

New Mailing Address:

FEI Number: 59-3570291

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

R & P PROPERTY MANAGEMENT
265 AIRPORT RD S
NAPLES, FL 34104 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: BENNETT, ROBERT
Address: P O BOX 1820
City-St-Zip: MARCO ISLAND, FL 34146

Title: VPD () Delete
Name: DONADIO, JOSEPH
Address: 140 BLUE HILL RD
City-St-Zip: DURHAM, CT 06422

Title: SD () Delete
Name: MCCRANEY, JAMES
Address: 700 LA PENINSULA BLVD #404
City-St-Zip: NAPLES, FL 34113

Title: TD () Delete
Name: LACHENMAYER, RICHARD
Address: 1253 CULLIGAN LANE
City-St-Zip: ST PAUL, MN 55118

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: PORTINGA, DEAN
Address: 700 LA PENINSULA BLVD #202
City-St-Zip: NAPLES, FL 34113

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

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: ROBERT BENNETT

PD

04/24/2008

Electronic Signature of Signing Officer or Director

Date