2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2009
Secretary of State

DOCUMENT# N99000007535

Entity Name: THE MASTERS AT PELICAN SOUND NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

MASTERS CIRCLE
ESTERO, FL 33928 US

New Principal Place of Business:

Current Mailing Address:

COLLIER FINANCIAL, INC.
4985 TAMIAMI TRAIL E.
NAPLES, FL 34113 US

New Mailing Address:

FEI Number: 65-0971057 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HART, STEPHEN P
4993 TAMIAMI TRAIL EAST
NAPLES, FL 34113 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: TD ( ) Delete
Name: WILSON, JAMES
Address: 21789 MASTERS CIRCLE
City-St-Zip: ESTERO, FL 33928

Title: VD ( ) Delete
Name: HOLTZ, MARCY
Address: 21880 MASTERS CIRCLE
City-St-Zip: ESTERO, FL 33928 US

Title: SD ( ) Delete
Name: BARBER, JODY
Address: 21828 MASTERS CIRCLE
City-St-Zip: ESTERO, FL 33928 US

Title: PD ( ) Delete
Name: PHILLIPS, JOHN
Address: 21888 MASTERS CIRCLE
City-St-Zip: ESTERO, FL 33928 US

Title: D ( ) Delete
Name: MANTILLA, ARNOLD
Address: 21945 MASTERS CIRCLE
City-St-Zip: ESTERO, FL 33928 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change ( ) Addition
Name: HOLTZ, MARCY
Address: 21880 MASTERS CIRCLE
City-St-Zip: ESTERO, FL 33928 US

Title: VD (X) Change ( ) Addition
Name: JANCIN, DONALD
Address: 21933 MATERS CIRCLE
City-St-Zip: ESTERO, FL 33928

Title: SD (X) Change ( ) Addition
Name: MAHER, JIM
Address: POB 1360
City-St-Zip: ESTERO, FL 33928

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: MARCY HOLTZ PD 04/16/2009

Electronic Signature of Signing Officer or Director — Date