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: MARTIN LAWTON

Electronic Signature of Signing Officer/Director Detail

(

SIGNATURE:

Officer/Director Detail :			
Title	VP	Title	PRESIDENT
Name	LAUGHLIN, JOAN	Name	LAWTON, MARTIN
Address	1400 POMPEI LN #28	Address	1400 POMPEI LN #39
City-State-Zip:	NAPLES FL 34104	City-State-Zip:	NAPLES FL 34104
Title	SECRETARY	Title	DIRECTOR
Name	MIELE, ROBERT	Name	MICHAEL, BLASUCCI
Address	1400 POMPEI LN #22	Address	1400 POMPEI LANE #53
City-State-Zip:	NAPLES FL 34104	City-State-Zip:	NAPLES FL 34103
Title	TREASURER		
Name	JOSEPH , ALTRUDA		
Address	1400 POMPEI LANE 2		
City-State-Zip:	NAPLES FL 34103		

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.

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Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

DYER, DENNIS C & D MANAGEMENT COMPANY LLC 5522 HUNTER BLVD. 2 NAPLES, FL 34116 US

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725773

Entity Name: SORRENTO VILLAS OF NAPLES, INC.

Current Principal Place of Business:

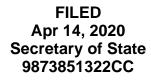
1400 POMPEI LANE NAPLES, FL 34103

Current Mailing Address:

1400 POMPEI LANE NAPLES, FL 34103 US

FEI Number: 59-1665463

PRESIDENT



Certificate of Status Desired: No

Date

Date