

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007068

Entity Name: VASARI COUNTRY CLUB MASTER ASSOCIATION, INC.**Current Principal Place of Business:**11250 VIA DE VASARI DRIVE
BONITA SPRINGS, FL 34135**Current Mailing Address:**11250 VIA DE VASARI DRIVE
BONITA SPRINGS, FL 34135**FEI Number:** 65-1050022**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VASQUEZ, ERIC JESQ
LAW OFFICES OF ERIC J. VASQUEZ
900 SIXTH AVENUE SOUTH, SUTE 201
NAPLES, FL 34102 US*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

Officer/Director Detail :

Title DP
Name MAIONE, FRED
Address 11250 VIA DE VASARI DRIVE
City-State-Zip: BONITA SPRINGS FL 34135

Title DT
Name GORDON, IAN D
Address 11250 VIA DE VASARI DRIVE
City-State-Zip: BONITA SPRINGS FL 34135

Title DS
Name DUNCAN, BOB
Address 11250 VIA DE VASARI DRIVE
City-State-Zip: BONITA SPRINGS FL 34135

Title VPD
Name GAVIN, GAIL
Address 11250 VIA DE VASARI DRIVE
City-State-Zip: BONITA SPRINGS FL 34135

Title D
Name BOYD, RON
Address 11250 VIA DE VASARI DRIVE
City-State-Zip: BONITA SPRINGS FL 34135

Title D
Name BELMONTI, SAMUEL
Address 11250 VIA DEL VASARI DRIVE
City-State-Zip: BONITA SPRINGS FL 34135

Title DIRECTOR
Name AMBROSE, DAVID
Address 11250 VIA DE VASARI DRIVE
City-State-Zip: BONITA SPRINGS FL 34135

Title DIRECTOR
Name CHASZAR, JACK
Address 11250 VIA DE VASARI DRIVE
City-State-Zip: BONITA SPRINGS FL 34135

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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: FRED MAIONE

PRESIDENT

03/21/2013

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	MARSHALL, PETER
Address	11250 VIA DE VASARI DRIVE
City-State-Zip:	BONITA SPRINGS FL 34135