

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000001978

**Entity Name:** VANDERBILT VILLAS, II, CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O RESORT MANAGEMENT  
2685 HORSESHOE DRIVE SOUTH STE 215  
NAPLES, FL 34104

**Current Mailing Address:**

C/O RESORT MANAGEMENT  
2685 HORSESHOE DRIVE SOUTH STE 215  
NAPLES, FL 34104

**FEI Number:** 65-1142871

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DAVIES, CHRISTOPHER  
27200 RIVERVIEW CENTER BLVD.  
#309  
BONITA SPRINGS, FL 34103 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:** CHRISTOPHER DAVIES

03/12/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name CHATFIELD, CARL  
Address 519 ROMA CT #3102  
City-State-Zip: NAPLES FL 34110

Title VP  
Name KADLEC, JOSEPH  
Address 519 ROMA CT #3101  
City-State-Zip: NAPLES FL 34110

Title S  
Name CALIJONE, MARIA  
Address 519 ROMA CT #2301  
City-State-Zip: NAPLES FL 34110

Title T  
Name NAPLES, RICHARD  
Address 519 ROMA CT #3207  
City-State-Zip: NAPLES FL 34110

*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:** CARL CHATFIELD

PRESIDENT

03/12/2015

Electronic Signature of Signing Officer/Director Detail

Date