2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006439

Entity Name: DELASOL HOMEOWNERS ASSOCIATION, INC.

FILED Feb 04, 2015 Secretary of State CC7147724183

Current Principal Place of Business:

C/O SANDCASTLE COMMUNITY MANAGEMENT 5495 BRYSON DRIVE SUITE 412

NAPLES, FL 34109

Current Mailing Address:

C/O SANDCASTLE COMMUNITY MANAGEMENT 5495 BRYSON DRIVE SUITE 412 NAPLES, FL 34109 US

FEI Number: 03-0526741 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ADAMCZYKE, MARK E GOEDE, ADAMCZYK & DEBOEST, PLLC 8950 FONTANA DEL SOL WAY, STE 100 NAPLES, FL 34109 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 PRESIDENT Title DIRECTOR

Name KING, TERRY Name DESPRES, GERMAIN

Address 5495 BRYSON DRIVE Address 5495 BRYSON DRIVE

SUITE 412 SUITE

City-State-Zip: NAPLES FL 34109 City-State-Zip: NAPLES FL 34109

Title VICE PRESIDENT / TREASURER Title DIRECTOR

Name SMALLEY, GREGORY Name ASHTON, BOB

Address 5495 BRYSON DRIVE Address 5495 BRYSON DRIVE

SUITE 412 SUITE 412

City-State-Zip: NAPLES FL 34109 City-State-Zip: NAPLES FL 34109

Title SECRETARY

Name CRUTCHFIELD, PAT

Address 5495 BRYSON DRIVE

SUITE

City-State-Zip: NAPLES FL 34109

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: PAT CRUTCHFIELD

SECRETARY

02/04/2015