

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726931

FILED  
Feb 08, 2011  
Secretary of State

**Entity Name:** GREENWOOD HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

661 CYPRESS WAY EAST  
NAPLES, FL 34110

**New Principal Place of Business:**

**Current Mailing Address:**

661 CYPRESS WAY EAST  
NAPLES, FL 34110

**New Mailing Address:**

**FEI Number:** 59-1672853

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SAMOUCÉ, MURRELL & GAL, P.A.  
5405 PARK CENTRAL COURT  
NAPLES, FL 34109 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:** DT  
**Name:** CUNNINGHAM, KAREN L  
**Address:** 684 POMPANO DRIVE  
**City-St-Zip:** NAPLES, FL 34110

**Title:** DP  
**Name:** O'BRIEN, PHILLIP  
**Address:** 646 POMPANO DRIVE  
**City-St-Zip:** NAPLES, FL 34110

**Title:** DS  
**Name:** LAMEY, DAN  
**Address:** 696 POMPANO DRIVE  
**City-St-Zip:** NAPLES, FL 34110

**Title:** DVP  
**Name:** LEADERS, BRIAN  
**Address:** EASTWOOD DRIVE  
**City-St-Zip:** NAPLES, FL 34110

**Title:** DVP  
**Name:** PITTMAN, ROBERT  
**Address:** 681 CYPRESS WAY EAST  
**City-St-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:** KAREN L. CUNNINGHAM

DT

02/08/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date