

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738330

FILED
Apr 18, 2011
Secretary of State

Entity Name: CUMBERLAND CIRCLE COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

1600 NW 19TH CIRCLE
GAINESVILLE, FL 32605 US

New Principal Place of Business:

Current Mailing Address:

C/O ACTION REAL ESTATE SERVICES
6110-B NW 1 PL
GAINESVILLE, FL 32607 US

New Mailing Address:

FEI Number: 59-1883157 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ACTION REAL ESTATE SERVICES
6110-B NW 1ST PL
GAINESVILLE, FL 32607 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: VD
Name: DUFFIELD, KEN
Address: 1603 NW 19 CIR
City-St-Zip: GAINESVILLE, FL 32605

Title: D
Name: ORR, SUZANNE
Address: 1623 NW 19 CIR
City-St-Zip: GAINESVILLE, FL 32605

Title: SD
Name: CANON, KATHERINE
Address: 1649 NW 19 CIR
City-St-Zip: GAINESVILLE, FL 32605

Title: TD
Name: SUMMERLIN, MARY ANNE
Address: 1605 NW 19TH CIRCLE
City-St-Zip: GAINESVILLE, FL 326054028

Title: PV
Name: HAMILTON, JONATHAN
Address: 1641 NW 19TH CIR
City-St-Zip: GAINESVILLE, FL 32605

Title: D
Name: EDWARDS, DORIS
Address: 1610 NW 19 CIR
City-St-Zip: GAINESVILLE, FL 32605

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: JONATHAN HAMILTON

P

04/18/2011

Electronic Signature of Signing Officer or Director

Date