

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747922

FILED  
Mar 20, 2012  
Secretary of State

**Entity Name:** THE HOMEOWNERS' ASSOCIATION OF COUNTRYPLACE, INC.

**Current Principal Place of Business:**

3941 COUNTRY VIEW LANE  
SARASOTA, FL 34233

**New Principal Place of Business:**

3631 COUNTRY PLACE BLVD  
SARASOTA, FL 34233

**Current Mailing Address:**

P.O. BOX 21173  
SARASOTA, FL 34276

**New Mailing Address:**

FEI Number: 59-2293313

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

THE LAW OFFICES OF LOBECK AND HANSON, P.A.  
2033 MAIN STREET  
SUITE 403  
SARASOTA, FL 34237 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: PD  
Name: WHITE, DONALD  
Address: 3631 COUNTRY PLACE BLVD.  
City-St-Zip: SARASOTA, FL 34233

Title: SD  
Name: MAGDA, MARIAN  
Address: 3941 COUNTRY VIEW LANE  
City-St-Zip: SARASOTA, FL 34233

Title: TD  
Name: COLEMAN, KATHY  
Address: 3764 COUNTRYSIDE ROAD  
City-St-Zip: SARASOTA, FL 34233

Title: VPD  
Name: BUCCI, PAMELA  
Address: 40109 COUNTRY VIEW DRIVE  
City-St-Zip: SARASOTA, FL 34233

Title: D  
Name: RICHMAN, JOAN  
Address: 3605 COUNTRY PLACE BLVD  
City-St-Zip: SARASOTA, FL 34233

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: KATHY COLEMAN

TD

03/20/2012

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

\_\_\_\_\_  
Date