

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761048

FILED  
Jan 11, 2010  
Secretary of State

**Entity Name:** CALUSA CLUB VILLAGE PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

18001 OLD CUTLER RD  
476  
MIAMI, FL 33157 US

**New Principal Place of Business:**

18001 OLD CUTLER RD  
SUITE 476  
MIAMI, FL 33157 US

**Current Mailing Address:**

18001 OLD CUTLER RD  
476  
MIAMI, FL 33157 US

**New Mailing Address:**

18001 OLD CUTLER RD  
SUITE 476  
MIAMI, FL 33157 US

FEI Number: 59-2384482

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

T & G MANAGEMENT SERVICES, INC.  
18001 OLD CUTLER ROAD  
476  
PALMETTO BAY, FL 33157 US

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

T & G MANAGEMENT SERVICES, INC.  
18001 OLD CUTLER ROAD  
SUITE 476  
PALMETTO BAY, FL 33157 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: ANTHONY LESTER

01/11/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SHAFFER, THOMAS  
Address: PO BOX 166116  
City-St-Zip: MIAMI, FL 33116

Title: VP  
Name: GREEN, STEPHEN  
Address: 13255 SW 88TH LANE  
City-St-Zip: MIAMI, FL 33186

Title: S  
Name: DIAMOND, JANEL  
Address: 12912 SW 88 TER  
City-St-Zip: MIAMI, FL 33186

Title: T  
Name: TALERO, ROSA  
Address: 13114 SW 88 LN  
City-St-Zip: MIAMI, FL 33186

Title: D  
Name: SIGNORELLI, NEIL  
Address: 8984 SW 128 CT  
City-St-Zip: MIAMI, FL 33186

Title: D  
Name: TAYLOR, ANNE MARIE  
Address: 12962 SW 88 LN  
City-St-Zip: MIAMI, FL 33186

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: THOMAS SHAFFER

P

01/11/2010

Electronic Signature of Signing Officer or Director

Date