

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770146

FILED  
Apr 04, 2012  
Secretary of State

**Entity Name:** CANALAKE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

CANALAKE HOMEOWNER ASSOCIATION, INC.  
5350 10TH AVENUE NORTH, SUITE 2  
GREENACRES, FL 33463 US

**New Principal Place of Business:**

**Current Mailing Address:**

CANALAKE HOMEOWNER ASSOCIATION, INC.  
5350 10TH AVENUE NORTH, SUITE 2  
GREENACRES, FL 33463 US

**New Mailing Address:**

**FEI Number:** 59-2339803      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

KATZMAN GARFINKEL & BERGER  
5297 W. COPANS RD.  
MARGATE, FL 33063 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: P  
Name: MORRIS, PATRICK  
Address: 3107 POOLSIDE DR.  
City-St-Zip: GREENACRES, FL 33463

Title: VP  
Name: MILLER, DAN  
Address: 3107 POOLSIDE DR.  
City-St-Zip: GREENACRES, FL 33463

Title: ST  
Name: JOSEPH, JEAN  
Address: 3107 POOLSIDE DRIVE  
City-St-Zip: GREENACRES, FL 33463

Title: D  
Name: DUNN, RICHARD  
Address: 3107 POOLSIDE DRIVE  
City-St-Zip: GREENACRES, FL 33463

Title: D  
Name: DONER, JEREMY  
Address: 3107 POOLSIDE DRIVE  
City-St-Zip: GREENACRES, FL 33463

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: PATRICK MORRIS

P

04/04/2012

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

\_\_\_\_\_ Date