

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000283

FILED  
Apr 07, 2011  
Secretary of State

**Entity Name:** TWIN LAKES TOWNHOMES COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

4400 HIGHWAY 20 E  
SUITE 312  
NICEVILLE, FL 32578

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 5263  
NICEVILLE, FL 32578

**New Mailing Address:**

FEI Number: 20-0921699

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LANDSBERGER, DARLANE  
4400 HIGHWAY 20 E  
SUITE 312  
NICEVILLE, FL 32578 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: RODRIGUEZ, CATHERINE  
Address: 419 TWIN LAKES LANE  
City-St-Zip: DESTIN, FL 32541 US

Title: D  
Name: KIERNAN, THOMAS  
Address: 1696 CALLE BONITA  
City-St-Zip: PENSACOLA BEACH, FL 32561 US

Title: T  
Name: PETRAROI, JANET  
Address: 1056 B GILMORE HILL RD  
City-St-Zip: LEBANON, TN 37087 US

Title: VP  
Name: DAVIS, BRAD  
Address: 29 WILLET TURN  
City-St-Zip: LUMBERTON, MS 39455 US

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: CATHERINE RODRIGUEZ

P

04/07/2011

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

\_\_\_\_\_  
Date