

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005011

FILED  
Apr 21, 2011  
Secretary of State

**Entity Name:** CASTLE PINES II TOWNHOMES ASSOCIATION, INC.

**Current Principal Place of Business:**

21045 COMMERCIAL TRIAL  
BOCA RATON, FL 33486

**New Principal Place of Business:**

**Current Mailing Address:**

21045 COMMERCIAL TRIAL  
BOCA RATON, FL 33486

**New Mailing Address:**

FEI Number: 20-1202672

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

ISSACSON, WILLIAM  
C/O LANG MGMT  
21045 COMMERCIAL TRAIL  
BOCA RATON, FL 33486 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: VP  
Name: TUTTLE, SANFORD C  
Address: 8121 MULLIGAN CIRCLE  
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: P  
Name: WRIGHT, RICHARD  
Address: 8132 CARNOUSTIE PLACE  
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: ST  
Name: BAUER, JOSEPH  
Address: 8194 MULLIGAN CIRCLE  
City-St-Zip: PORT ST. LUCIE, FL 34986

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: WRIGHT

P

04/21/2011

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

\_\_\_\_\_ Date