

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06949

FILED
Apr 24, 2012
Secretary of State

Entity Name: WINGED FOOT COTTAGE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1111 SE FEDERAL HWY
SUITE 100
STUART, FL 34994

New Principal Place of Business:

Current Mailing Address:

1111 SE FEDERAL HWY
SUITE 100
STUART, FL 34994

New Mailing Address:

FEI Number: 59-2481859

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADVANTAGE PROPERTY MANAGEMENT
1111 SE FEDERAL HWY
SUITE 100
STUART, FL 34994 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: D
Name: CONNOLLY, LORRAINE
Address: 7038 WINGED FOOT DRIVE
City-St-Zip: STUART, FL 34997

Title: PD
Name: DUANE, LAWRENCE
Address: 7032 WINGED FOOT DRIVE
City-St-Zip: STUART, FL

Title: D
Name: CORSIG, DONALD
Address: 7016 WINGED FOOT DRIVE
City-St-Zip: STUART, FL 34997

Title: VPD
Name: FREEMAN, ROBERT
Address: 7010 WINGED FOOD DRIVE
City-St-Zip: STUART, FL

Title: SD
Name: CARMODY, MARIAM
Address: 7000 WINGED FOOT DRIVE
City-St-Zip: STUART, FL 34997

Title: TD
Name: KNIGHT, MARY
Address: 7074 WINGED FOOT DRIVE
City-St-Zip: STUART, FL 34997

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: LAWRENCE DUANE

PRES

04/24/2012

Electronic Signature of Signing Officer or Director

Date