

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20826

FILED
Apr 17, 2012
Secretary of State

Entity Name: SETTLER'S LANDING HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O THE CAM TEAM, LLC
1008 PARK AVE.
ORANGE PARK, FL 32073 US

New Principal Place of Business:

Current Mailing Address:

C/O THE CAM TEAM, LLC
1008 PARK AVE.
ORANGE PARK, FL 32073 US

New Mailing Address:

FEI Number: 59-2823902 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

THE CAM TEAM, LLC
1008 PARK AVE.
ORANGE PARK, FL 32073 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: BRADBERRY, DANIEL
Address: 8167 CUMBERLAND GAP TRIAL
City-St-Zip: JACKSONVILLE, FL 32244

Title: TD
Name: HOLLIS, MARVIN
Address: 8125 CUMBERLAND GAP TRAIL
City-St-Zip: JACKSONVILLE, FL 32244

Title: VPD
Name: FIELDS, SHARREN
Address: 8148 BOONESBOROUGH TRL
City-St-Zip: JACKSONVILLE, FL 32244

Title: PD
Name: SPRING, MARK
Address: 8001 CUMBERLAND GAP TRAIL
City-St-Zip: JACKSONVILLE, FL 32244

Title: D
Name: SULLIVAN, BARNEY
Address: 8066 CUMBERLAND GAP TRAIL
City-St-Zip: JACKSONVILLE, FL 32244

Title: S
Name: BRECHT, SUSAN
Address: 8249 DOVER CLIFF COURT
City-St-Zip: JACKSONVILLE, FL 32244

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: LINDA M. WOODS

CAM

04/17/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date