## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N9700000019

FILED Mar 05, 2011 Secretary of State

**Entity Name: CAREFREE CLUBHOUSE CORPORATION** 

**Current Principal Place of Business: New Principal Place of Business:** 

3000 CAREFREE BOULEVARD NORTH FORT MYERS, FL 33917

**Current Mailing Address: New Mailing Address:** 

US

3000 CAREFREE BOULEVARD NORTH FORT MYERS, FL 33917

FEI Number: 65-0715178 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

DRAKE, MARYKATE MANAGER 3000 CÁREFREE BOULEVARD NORTH FORT MYERS, FL 33917

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:**

SNOOK, JANICE AT-LARG Name: Address: 18170 WILLA WAY

City-St-Zip: NORTH FORT MYERS, FL 33917

Title: PD

Name: NICKLAS, NAN CHAIR Address: 3216 SUSAN B CIRLE

City-St-Zip: NORTH FORT MYERS, FL 33917

Title:

ROUTHIER, WILDA TREASUR Name: Address: 3256 ELEANOR WAY

City-St-Zip: NORTH FORT MYERS, FL 33917

Title:

Name: BAKER, JANE SECRETA Address: 3221 AMELIA RUN WAY

City-St-Zip: NORTH FORT MYERS, FL 33917

Title:

BURAUKAS, ALICE AT-LARG Name: 3380 AMELIA RUN WAY Address: NORTH FORT MYERS, FL 33917 City-St-Zip:

Title:

DRAKE, MARYKATE MANAGER Name: Address: 10036 PACIFIC PINES AVE FT. MYERS, FL 33966 City-St-Zip:

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: MARYKATE DRAKE GM 03/05/2011