

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003272

FILED
Mar 23, 2011
Secretary of State

Entity Name: COUNTRYSIDE AT VERO BEACH HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

8775 - 20TH STREET #950
VERO BEACH, FL 32966

New Principal Place of Business:

Current Mailing Address:

8775 - 20TH STREET #950
VERO BEACH, FL 32966

New Mailing Address:

FEI Number: 65-0849281

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLLING, LEE J ESQ
529 VERSAILLES DRIVE
SUITE 103
MAITLAND, FL 32751 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: REESE, ROBERT
Address: 8775 20TH ST LOT 429
City-St-Zip: VERO BEACH, FL 32966

Title: VP
Name: CAUL, ARTHUR
Address: 8775 20TH ST LOT 127
City-St-Zip: VERO BEACH, FL 32966

Title: SEC
Name: LEITHEIM, CAROL
Address: 8775 20TH ST., LOT 560
City-St-Zip: VERO BEACH, FL 32966

Title: T
Name: PRILLAMAN, MYRTLE E
Address: 8775 20TH ST., LOT 222
City-St-Zip: VERO BEACH, FL 32966

Title: D
Name: PECK, HARRY
Address: 8775 20TH ST LOT 625
City-St-Zip: VERO BEACH, FL 32966

Title: D
Name: MARTIN, PATRICIA
Address: 8775 20TH ST LOT 158
City-St-Zip: VERO BEACH, FL 32966

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: MYRTLE E. PRILLAMAN

T

03/23/2011

Electronic Signature of Signing Officer or Director

Date