

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007677

FILED  
Mar 15, 2012  
Secretary of State

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

**Current Principal Place of Business:**

2140 N.W. RESERVE PARK TRACE  
PORT ST. LUCIE, FL 34986

**New Principal Place of Business:**

**Current Mailing Address:**

21045 COMMERCIAL TRIAL  
BOCA RATON, FL 33486

**New Mailing Address:**

FEI Number: 65-0971854

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

ISAACSON, WILLIAM K  
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: T  
Name: SAULNIER, ROBERT  
Address: 9322 WENTWORTH LANE  
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: S  
Name: HENDERSON, THOMAS  
Address: 9207 WENTWORTH LANE  
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: P  
Name: PIPER, NEAGLES  
Address: 9340 WORLD CUP WAY  
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: ROBERT SAULINER

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03/15/2012

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

\_\_\_\_\_  
Date