

**2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Dec 16, 2011  
Secretary of State**

DOCUMENT# 361830

Entity Name: POINCIANA NEW TOWNSHIP, INC.

**Current Principal Place of Business:**

**New Principal Place of Business:**

395 VILLAGE DRIVE  
POINCIANA, FL 34759 US

**Current Mailing Address:**

**New Mailing Address:**

395 VILLAGE DRIVE  
POINCIANA, FL 34759 US

FEI Number: 59-1288187

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:**

NRAI SERVICES, INC.  
515 E. PARK AVE.  
TALLAHASSEE, FL 32301 US

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: PD  
Name: YUNES, HENRY D  
Address: 395 VILLAGE DRIVE  
City-St-Zip: POINCIANA, FL 34759 US

Title: VPSD  
Name: FLECTCHER, PATRICIA K  
Address: 395 VILLAGE DRIVE  
City-St-Zip: POINCIANA, FL 34759 US

Title: TASD  
Name: JOHNSTON, TINA M  
Address: 395 VILLAGE DRIVE  
City-St-Zip: POINCIANA, FL 34759 US

Title: AVP  
Name: WEIDA, RICHARD P  
Address: 395 VILLAGE DRIVE  
City-St-Zip: POINCIANA, FL 34759 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: FLETCHER, PATRICIA

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12/16/2011

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

\_\_\_\_\_  
Date