

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770325

FILED
Jan 09, 2012
Secretary of State

Entity Name: OLD CUTLER LAKES BY THE BAY COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

10700 CARIBBEAN BLVD # 104
CUTLER BAY, FL 33189 US

New Principal Place of Business:

Current Mailing Address:

C/O THE CONTINENTAL GROUP INC.
2950 N 28TH TERR
HOLLYWOOD, FL 33020 US

New Mailing Address:

FEI Number: 59-2378225 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PAIGE, ROBERT E
9500 S. DADELAND BLVD STE 550
MIAMI, FL 33190 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: VD
Name: TILLOTSON, GAYLE
Address: 10700 CARIBBEAN BLVD # 104
City-St-Zip: CUTLER BAY, FL 33189

Title: PD
Name: SHAND, JACKIE
Address: 10700 CARIBBEAN BLVD # 104
City-St-Zip: CUTLER BAY, FL 33189

Title: TSD
Name: SBAR, ILYNE
Address: 10700 CARIBBEAN BLVD # 104
City-St-Zip: CUTLER BAY, FL 33189

Title: D
Name: TAYLOR, PAULETTE
Address: 10700 CARIBBEAN BLVD # 104
City-St-Zip: CUTLER BAY, FL 33189

Title: D
Name: NUSSBAUM, SUSAN
Address: 10700 CARIBBEAN BLVD # 104
City-St-Zip: CUTLER BAY, FL 33189

Title: D
Name: BREWER, RICHARD
Address: 10700 CARIBBEAN BLVD # 104
City-St-Zip: CUTLER BAY, FL 33189

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: JACKIE SHAND

PD

01/09/2012

Electronic Signature of Signing Officer or Director

_____ Date