

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001572

FILED  
Mar 21, 2012  
Secretary of State

**Entity Name:** AMBERWYND OF SNEAD ISLAND HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1101 9TH AVE WEST  
BRADENTON, FL 34205

**New Principal Place of Business:**

**Current Mailing Address:**

1101 9TH AVE WEST  
BRADENTON, FL 34205

**New Mailing Address:**

**FEI Number:** 65-0645214

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CABANILLAS, DENISE K  
1101 9TH AVE WEST  
BRADENTON, FL 34205 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: D  
Name: BARNETT, JAMES  
Address: 1834 AMBERWYND CIR W  
City-St-Zip: PALMETTO, FL 34221

Title: D  
Name: WILSON, LESLIE  
Address: 1747 AMBERWYND CIR W  
City-St-Zip: PALMETTO, FL 34221

Title: D  
Name: DERKSEN, JOY  
Address: 1858 AMBERWYND CIR W  
City-St-Zip: PALMETTO, FL 34221

Title: DP  
Name: HANCOCK, DENNIS  
Address: 1814 AMBERWYND CIR W  
City-St-Zip: PALMETTO, FL 34221

Title: TD  
Name: KILLINGSWORTH, JIM  
Address: 1736 AMBERWYND CIR W  
City-St-Zip: PALMETTO, FL 34221

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: DENNIS HANCOCK

P

03/21/2012

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

\_\_\_\_\_  
Date