

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 763407

**Entity Name:** CALOOSA COUNTRY CLUB ESTATES PROPERTY OWNERS ASSOCIATION, INC.**FILED**  
**Mar 24, 2013**  
**Secretary of State**  
**CC4450472880****Current Principal Place of Business:**2011 EAST VIEW DR  
SUN CITY CENTER, FL 33573**Current Mailing Address:**P.O. BOX 5143  
SUN CITY CENTER, FL 33591-5143**FEI Number: 59-2529059****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CIOTA, ANITA  
2011 EAST VIEW DR  
SUN CITY CENTER, FL 33573 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**Officer/Director Detail :**

Title	DIRECTOR
Name	SCHULENBERG, LOREN
Address	1903 EAST VIEW DRIVE
City-State-Zip:	SUN CITY CENTER FL 33573

Title	S
Name	WELPER, EUGENE
Address	2017 EAST VIEW DRIVE
City-State-Zip:	SUN CITY CENTER FL 33573

Title	T
Name	CIOTA, ANITA L
Address	2011 EAST VIEW DRIVE
City-State-Zip:	SUN CITY CENTER FL 33573

Title	PRESIDENT
Name	SMITHYMAN, MERLENE
Address	1927 EAST VIEW DRIVE
City-State-Zip:	SUN CITY CENTER FL 33573

Title	D
Name	SQUIER, DAVID
Address	2013 EAST VIEW DRIVE
City-State-Zip:	SUN CITY CENTER FL 33573

Title	VP
Name	LAST, JACK
Address	2006 EAST VIEW DRIVE
City-State-Zip:	SUN CITY CENTER FL 33573

*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: ANITA L. CIOTA****TREASURER****03/24/2013**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date