

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717090

FILED  
Jan 12, 2012  
Secretary of State

**Entity Name:** CAPE HAZE PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

SPANIARDS RD & SPYGLASS ALLEY  
PLACIDA, FL 33946

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 690  
PLACIDA, FL 33946

**New Mailing Address:**

**FEI Number:** 59-1713449

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RIELEY, SHEDON C  
510 GREEN DOLPHIN DR. S.  
PLACIDA, FL 33946 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: PD  
Name: WITSCHONKE, ROSS  
Address: 50 BUCCANEER BEND  
City-St-Zip: PLACIDA, FL 33946

Title: VPD  
Name: CORBIN, JEANNE  
Address: 240 CAPSTAN DRIVE  
City-St-Zip: PLACIDA, FL 33946

Title: TD  
Name: RIELEY, SHELDON C  
Address: 510 GREEN DOLPHIN DR. S.  
City-St-Zip: PLACIDA, FL 33946

Title: D  
Name: BOND, RALPH  
Address: 515 BINNACLE BEND  
City-St-Zip: PLACIDA, FL 33946

Title: S  
Name: FITZGEREALD, MARY LOU  
Address: 480 GREEN DOLPHIN DRIVE SOUTH  
City-St-Zip: PLACIDA, FL 33946

Title: D  
Name: BUTLER, SUSAN  
Address: 470 CORAL CREEK DRIVE  
City-St-Zip: PLACIDA, FL 33946

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: SHELDON C. RIELEY

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01/12/2012

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

\_\_\_\_\_  
Date