

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727437

FILED
Feb 15, 2012
Secretary of State

Entity Name: FLAMINGO ESTATES CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

4516 PARROT AVENUE
NAPLES, FL 34104

New Principal Place of Business:

Current Mailing Address:

PO BOX 8172
NAPLES, FL 34101

New Mailing Address:

FEI Number: 59-1776053

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

POCHOPIN, PATRICIA
4516 PARROT AVENUE
NAPLES, FL 34104 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: PTD
Name: POCHOPIN, PATRICIA PRES
Address: 4516 PARROT AVENUE
City-St-Zip: NAPLES, FL 34104

Title: VP
Name: HUBER, HARRY VP
Address: 937 CARDINAL STREET
City-St-Zip: NAPLES, FL 34104 US

Title: SD
Name: WOLFE, JAN SEC
Address: 916 ROSEA COURT
City-St-Zip: NAPLES, FL 34104

Title: TRED
Name: ROGERS, MICHAEL TRE
Address: 4538 PARROT AVENUE
City-St-Zip: NAPLES, FL 34104

Title: D
Name: HUGES, WILLIAM DIR
Address: 4501 ROSEA CT
City-St-Zip: NAPLES, FL 34104

Title: D
Name: NOLAN, VIRGINIA DIR
Address: 1000 ROSEATE DR
City-St-Zip: NAPLES, FL 34104

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: PATRICIA POCHOPIN

PTD

02/15/2012

Electronic Signature of Signing Officer or Director

Date