

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732831

FILED  
Jan 10, 2012  
Secretary of State

**Entity Name:** SORRENTO EAST PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

SORRENTO EAST PROPERTY OWNERS ASSOC  
132 DAVINCI DR.  
NOKOMIS, FL 34275 US

**New Principal Place of Business:**

SORRENTO EAST PROPERTY OWNERS ASSOC  
465 RUBENS DR. EAST  
NOKOMIS, FL 34275 US

**Current Mailing Address:**

SORRENTO EAST PROPERTY OWNERS ASSOC  
P. O. BOX 232  
NOKOMIS, FL 34274 US

**New Mailing Address:**

**FEI Number:** 59-1574013      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

KERNAGHAN, GEORGE TREAS  
132 DAVINCI DR.  
NOKOMIS, FL 34275 US

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

TRINKLEIN, KEVIN S  
465 RUBENS DR EAST  
NOKOMIS, FL 34275 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: KEVIN TRINKLEIN

01/10/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: DASH, STEPHANIE  
Address: 112 DEGAS  
City-St-Zip: NOKOMIS, FL 34275

Title: VP  
Name: MALIK, HUSS  
Address: 241 MATISSE CIR. NORTH  
City-St-Zip: NOKOMIS, FL 34275

Title: S  
Name: MAZUR, IRENE  
Address: 109 MATISSE CIR. WEST  
City-St-Zip: NOKOMIS, FL 34275

Title: T  
Name: TRINKLEIN, KEVIN  
Address: 465 RUBENS DR. EAST  
City-St-Zip: NOKOMIS, FL 34275

Title: D  
Name: GOSSETT, JASON  
Address: 457 RUBENS DR. EAST  
City-St-Zip: NOKOMIS, FL 34275

Title: D  
Name: CLEMENTS, ROBERT  
Address: 328 MONET DR  
City-St-Zip: NOKOMIS, FL 34275

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: KEVIN TRINKLEIN

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01/10/2012

Electronic Signature of Signing Officer or Director

Date