

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734460

FILED  
Feb 21, 2011  
Secretary of State

**Entity Name:** THE COUNTRY CLUB OF SARASOTA HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

LIGHTHOUSE PROPERTY MGMT  
16 CHURCH ST  
OSPREY, FL 34229 US

**New Principal Place of Business:**

5310 CLARK RD  
SUITE 207  
SARASOTA, FL 34233 US

**Current Mailing Address:**

LIGHTHOUSE PROPERTY MGMT  
16 CHURCH ST  
OSPREY, FL 34229 US

**New Mailing Address:**

3412 CLARK RD  
PMB 236  
SARASOTA, FL 34231 US

**FEI Number:** 59-1906607

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GROSKE, RAY  
3936 SPYGLASS HILL ROAD  
SARASOTA, FL 34238 US

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

THE BARLOW GROUP  
5310 CLARK RD  
SUITE 207  
SARASOTA, FL 34233 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: CLIVE BURNETT

02/21/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: GERRITSEN, MARY LOUISE  
Address: 5310 CLARK RD., STE 207  
City-St-Zip: SARASOTA, FL 34233

Title: S  
Name: BORGELT, BILL  
Address: 5310 CLARK RD., STE 207  
City-St-Zip: SARASOTA, FL 34233

Title: T  
Name: CONRAD, JENNIFER  
Address: 5310 CLARK RD., STE 207  
City-St-Zip: SARASOTA, FL 34233

Title: VP  
Name: THOMPSON, DAN  
Address: 5310 CLARK RD., STE 207  
City-St-Zip: SARASOTA, FL 34233

Title: AS  
Name: BURNETT, CLIVE  
Address: 5310 CLARK RD., STE 207  
City-St-Zip: SARASOTA, FL 34233

Title: D  
Name: SMITH-CLEMENS, SALLY  
Address: 5310 CLARK RD., STE 207  
City-St-Zip: SARASOTA, FL 34233

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: CLIVE BURNETT

AS

02/21/2011

Electronic Signature of Signing Officer or Director

Date