

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748048

FILED
Apr 16, 2010
Secretary of State

Entity Name: TALL PINES PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O COASTAL PROPERTY MANAGEMENT
501 GOODLETTE RD. N, STE C-200
NAPLES, FL 34102 US

New Principal Place of Business:

Current Mailing Address:

C/O COASTAL PROPERTY MANAGEMENT
501 GOODLETTE RD. N, STE C-200
NAPLES, FL 34102 US

New Mailing Address:

FEI Number: 59-2761036

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COASTAL PROPERTY MANAGEMENT
501 GOODLETTE RD. N, STE C-200
NAPLES, FL 34102 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: S/T
Name: CROUSE, LAWRENCE
Address: 6040 CYPRESS HOLLOW WAY
City-St-Zip: NAPLES, FL 34109

Title: D
Name: WOLF, DAVIS
Address: 6001 CYPRESS HOLLOW WAY
City-St-Zip: NAPLES, FL 34109

Title: P
Name: BOROWSKI, DAVID
Address: 6061 CYPRESS HOLLOW WAY
City-St-Zip: NAPLES, FL 34109

Title: D
Name: HAMANN, CHRIS
Address: 5661 CYPRESS HOLLOW WAY
City-St-Zip: NAPLES, FL 34109

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: JOHN S GREEN

MGR

04/16/2010

Electronic Signature of Signing Officer or Director

Date