

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008459

FILED
Apr 20, 2011
Secretary of State

Entity Name: TOWN LAKES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

18950 FOUNTAIN MIST BLVD.
LEHIGH ACRES, FL 33972

New Principal Place of Business:

Current Mailing Address:

18950 FOUNTAIN MIST BLVD.
LEHIGH ACRES, FL 33972

New Mailing Address:

FEI Number: 65-1065168

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VISION ASSOCIATION MANAGEMENT
11691 GATEWAY BLVD
SUITE 203
FORT MYERS, FL 33913 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: DP
Name: BARICELLI, PATRICK
Address: 8080 FOUNTAIN MIST BLVD
City-St-Zip: LEHIGH ACRES, FL 33972

Title: D
Name: GIESSMAN, NEAL
Address: 8060 FOUNTAIN MIST BLVD
City-St-Zip: LEHIGH ACRES, FL 33972

Title: DS
Name: FLOWERS, THERESA
Address: 8001 GOPHER TORTOISE TRAIL
City-St-Zip: LEHIGH ACRES, FL 33972

Title: DT
Name: SCOTT, TED
Address: 8030 LIRIOPE LOOP
City-St-Zip: LEHIGH ACRES, FL 33972

Title: DVP
Name: SCOTT, JEAN
Address: 8030 LIRIOPE LOOP
City-St-Zip: LEHIGH ACRES, FL 33972

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: TED SCOTT

DT

04/20/2011

Electronic Signature of Signing Officer or Director

Date