

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00029

FILED
Mar 28, 2011
Secretary of State

Entity Name: COUNTRY LAKES OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

5267 COUNTRY FIELD CIRCLE
FT. MYERS, FL 33905 US

New Principal Place of Business:

Current Mailing Address:

8270 COLLEGE PKWY
SUITE 104
FORT MYERS, FL 33919 US

New Mailing Address:

FEI Number: 59-2410195 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CONRAD, DEBBIE
PARAGON FINANCIAL SVCS
8270 COLLEGE PKWY #104
FORT MYERS, FL 33919 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: D
Name: MALACHOWSKI, MICHAEL
Address: 5426 COUNTRY DALE COURT
City-St-Zip: FT. MYERS, FL 33905

Title: P
Name: LUECKE, MICHAEL
Address: 5432 COUNTRY DALE CT.
City-St-Zip: FORT MYERS, FL 33905

Title: D
Name: WARREN JR, ERNEST
Address: 5386 COUNTRYDALE COURT
City-St-Zip: FORT MYERS, FL 33905

Title: S
Name: EPIFANIO, PATRICIA
Address: 9755 CATTAIL COURT
City-St-Zip: FT MYERS, FL 33905

Title: T
Name: SWEENEY, JAMES
Address: 5475 COUNTRY DALE COURT
City-St-Zip: FORT MYERS, FL 33905

Title: D
Name: ELLIOTT, JAMES
Address: 5268 COUNTRYFIELD CIRCLE
City-St-Zip: FORT MYERS, FL 33905

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: MICHAEL LUECKE

P

03/28/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date