

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00854

FILED
Feb 15, 2012
Secretary of State

Entity Name: CLUSTERS AT CARROLLWOOD SPRINGS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3818 SHORESIDE CIRCLE
TAMPA, FL 33624 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 340673
TAMPA, FL 336940673 US

New Mailing Address:

FEI Number: 59-2380835

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE FURIO, JAMES PA
101 E. KENNEDY BLVD., STE 1030
TAMPA, FL 33602 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: PD
Name: BURKE, MARTHA MS>
Address: 3943 SHORESIDE CIR.
City-St-Zip: TAMPA, FL 33624 US

Title: D
Name: GUNTHORPE, PAUL MR.
Address: 3920 SHORESIDE CIRCLE
City-St-Zip: TAMPA, FL 33624 US

Title: VPD
Name: MEYER, STEVE MR
Address: 3806 SHORESIDE CIRCLE
City-St-Zip: TAMPA, FL 33624 US

Title: S/TD
Name: HARKELL, MAURICE W MR.
Address: 3818 SHORESIDE CIRCLE
City-St-Zip: TAMPA, FL 33624 US

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: MAURICE W. HARKELL

S/TD

02/15/2012

Electronic Signature of Signing Officer or Director

Date