

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000644

FILED  
Feb 17, 2012  
Secretary of State

**Entity Name:** SEMINOLE LAKES HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O CAMS  
1037 STATE ROAD 7 SUITE 302  
WELLINGTON, FL 33414

**New Principal Place of Business:**

**Current Mailing Address:**

C/O CAMS  
1037 STATE ROAD 7 SUITE 302  
WELLINGTON, FL 33414

**New Mailing Address:**

**FEI Number:** 65-1131069

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BECKER & POLIAKOFF  
625 N. FLAGLER DRIVE  
7TH FLOOR  
WEST PALM BEACH, FL 33401 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:** BATES, ELLIOTT  
**Address:** 111 SEMINOLE LAKES DR  
**City-St-Zip:** ROYAL PALM BEACH, FL 33411

**Title:** SD  
**Name:** HENRICK, DANA  
**Address:** 304 RIVER BLUFF LN.  
**City-St-Zip:** ROYAL PALM BCH., FL 33411

**Title:** TD  
**Name:** RAUSCHER, YVETTE  
**Address:** 315 RIVER BLUFF LANE  
**City-St-Zip:** ROYAL PALM BEACH, FL 33411

**Title:** D  
**Name:** STEPHAN, JIM  
**Address:** 215 SEMINOLE LAKE DRIVE  
**City-St-Zip:** ROYAL PALM BEACH, FL 33411

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:** ELLIOT BATES

PD

02/17/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date