

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002282

FILED  
May 17, 2011  
Secretary of State

Entity Name: SPOONBILL COVE AT CARLTON LAKES, INC.

## Current Principal Place of Business:

%GULF BREEZE MGMT SVCS OF SW FL , LLC  
8910 TERRENE CT., STE 200  
BONITA SPRINGS, FL 34135

## New Principal Place of Business:

%GULF BREEZE MGMT SVCS., LLC  
8910 TERRENE CT., STE 200  
BONITA SPRINGS, FL 34135

## Current Mailing Address:

%GULF BREEZE MGMT SVCS OF SW FL , LLC  
8910 TERRENE CT., STE 200  
BONITA SPRINGS, FL 34135

## New Mailing Address:

%GULF BREEZE MGMT SVCS., LLC  
8910 TERRENE CT., STE 200  
BONITA SPRINGS, FL 34135

FEI Number: 80-0058353

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WEIDNER, RALPH L  
%GULF BREEZE MGMT SVCS OF SW FL LLC  
8910 TERRENE CT., STE 200  
BONITA SPRINGS, FL 34135 US

## Name and Address of New Registered Agent:

WEIDNER, RALPH L  
%GULF BREEZE MGMT SVCS., LLC  
8910 TERRENE CT., STE 200  
BONITA SPRINGS, FL 34135 US

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:

05/17/2011

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: SD  
Name: MOUSA, BRUCE  
Address: 5645 NORTHBORO DRIVE, #101  
City-St-Zip: NAPLES, FL 34110

Title: PD  
Name: SEIDEL, ROBERT  
Address: 5615 NORTHBORO DRIVE, #101  
City-St-Zip: NAPLES, FL 34110

Title: VD  
Name: BRESNICK, ARNOLD  
Address: 5635 NORTHBORO DRIVE, #101  
City-St-Zip: NAPLES, FL 34110

Title: D  
Name: MCGILL, CHARLEEN A  
Address: 5660 NORTHBORO DRIVE, #102  
City-St-Zip: NAPLES, FL 34110

Title: TD  
Name: SCHROEDER, THOMAS V  
Address: 5640 NORTHBORO DRIVE, #102  
City-St-Zip: NAPLES, FL 34110

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: ROBERTSEIDEL

PRES

05/17/2011

Electronic Signature of Signing Officer or Director

Date