

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000416

FILED  
Mar 19, 2012  
Secretary of State

Entity Name: SAGO POINTE RECREATION ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O INTEGRATED PROPEERTY MGMT.  
5020 TAMAMI TR NORTH, STE 206  
NAPLES, FL 34103

**New Principal Place of Business:**

**Current Mailing Address:**

C/O INTEGRATED PROPEERTY MGMT.  
5020 TAMAMI TR NORTH, STE 206  
NAPLES, FL 34103

**New Mailing Address:**

FEI Number: 01-0638195

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SHIELDS, CHRISTOPHER J  
1833 HENDRY STREET  
FORT MYERS, FL 33901 US

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

PAVESE LAW FIRM  
1833 HENDRY STREET  
FORT MYERS, FL 33901 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: CHRISTOPHER J. SHIELDS

03/19/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: WALLACE, ROBERT  
Address: 22881 SAGO POINT DR. #1903  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: DS  
Name: LENAHAN, PATRICK J  
Address: 22801 SAGO POINTE DR. #1301  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: DVP  
Name: COOPER, WENDELL G  
Address: 22801 SAGO POINTE DRIVE, #1307  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: DAL  
Name: DONATELLI, ANTHONY A  
Address: 22911 SAGO POINTE DR., #2201  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: DT  
Name: MCGOWAN, JAMES R  
Address: 22810 SAGO POINTE DR., #2405  
City-St-Zip: BONITA SPRINGS, FL 34135

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: PATRICK LENAHAN

DS

03/19/2012

Electronic Signature of Signing Officer or Director

Date