

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002332

FILED  
Apr 28, 2011  
Secretary of State

**Entity Name:** COLONIAL OAKS COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O COMPASS GROUP  
3701 TAMIAMI TRAIL N, 3RD FLOOR  
NAPLES, FL 34103

**New Principal Place of Business:**

**Current Mailing Address:**

C/O COMPASS GROUP  
3701 TAMIAMI TRAIL N, 3RD FLOOR  
NAPLES, FL 34103

**New Mailing Address:**

**FEI Number:** 71-0888448

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DAVID E LEIGH, PA  
5150 TAMIAMI TRAIL N  
STE 501  
NAPLES, FL 34110 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: P  
Name: WILLIAMS, BARBARA  
Address: 9966 COLONIAL WALK N  
City-St-Zip: ESTERO, FL 33928

Title: T  
Name: BAIN, KAREN  
Address: 9978 COLONIAL WALK NORTH  
City-St-Zip: ESTERO, FL 33928

Title: VP  
Name: SHEERIN, LORI  
Address: 9912 COLONIAL WALK N  
City-St-Zip: ESTERO, FL 33928

Title: S  
Name: NIES, TERI  
Address: 9983 COLONIAL WALK N  
City-St-Zip: ESTERO, FL 33928

Title: D  
Name: O'DEA, MICHAEL  
Address: 9984 COLONIAL WALK N  
City-St-Zip: ESTERO, FL 33928

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:** MARK HUMPHREY

CFO

04/28/2011

Electronic Signature of Signing Officer or Director

Date