

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004557

FILED
Mar 02, 2012
Secretary of State

Entity Name: EMERALD ESTATES/INDIAN RIVER HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O SOUNDVIEW PROPERTY MANAGEMENT
2061 INDIAN RIVER BLVD
VERO BEACH, FL 32960

New Principal Place of Business:

C/O SOUNDVIEW PROPERTY MANAGEMENT
2095 INDIAN RIVER BLVD
VERO BEACH, FL 32960

Current Mailing Address:

C/O SOUNDVIEW PROPERTY MANAGEMENT
2061 INDIAN RIVER BLVD
VERO BEACH, FL 32960

New Mailing Address:

C/O SOUNDVIEW PROPERTY MANAGEMENT
2095 INDIAN RIVER BLVD
VERO BEACH, FL 32960

FEI Number: 02-0671253

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PALESTRINI, PAUL
2061 INDIAN RIVER BLVD
VERO BEACH, FL 32960 US

Name and Address of New Registered Agent:

PALESTRINI, PAUL
2095 INDIAN RIVER BLVD
VERO BEACH, FL 32960 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: PAUL PALESTRINI

03/02/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: BOLTON, BURT
Address: 2095 INDIAN RIVER BLVD
City-St-Zip: VERO BEACH, FL 32960

Title: VP
Name: ZYMROZ, JOYCE
Address: 2095 INDIAN RIVER BLVD
City-St-Zip: VERO BEACH, FL 32960

Title: T
Name: THWEATT-LEE, SUSAN
Address: 2095 INDIAN RIVER BLVD
City-St-Zip: VERO BEACH, FL 32960

Title: S
Name: VENTURI, JILL
Address: 2095 INDIAN RIVER BLVD
City-St-Zip: VERO BEACH, FL 32960

Title: D
Name: ROBINSON, DANNY
Address: 2095 INDIAN RIVER BLVD
City-St-Zip: VERO BEACH, FL 32960

Title: D
Name: BARTUCELLI, THERESA
Address: 2095 INDIAN RIVER BLVD
City-St-Zip: VERO BEACH, FL 32960

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: PAUL PALESTRINI

RA

03/02/2012

Electronic Signature of Signing Officer or Director

Date