

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001477

FILED
Jan 28, 2011
Secretary of State

Entity Name: TWIN PINES VILLAGE HOME OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

4480 MAILBOX AVENUE
NORTH FORT MYERS, FL 33903

New Principal Place of Business:

Current Mailing Address:

4480 MAILBOX AVENUE
NORTH FORT MYERS, FL 33903

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ST. LAURENT, LOUIS S
9881 NW 54TH PL
CORAL SPRINGS, FL 33076 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: KENT, JERRY
Address: 4438 HITZING
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: VP
Name: HOOVER, VICKY
Address: 4476 MAILBOX AVENUE
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: S
Name: MAUCH, MARY A
Address: 4480 MAILBOX AVENUE
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: T
Name: MAUCH, ALBERT
Address: 4480 MAILBOX AVE.
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: TRUS
Name: KAYE, SCHNEIDER
Address: 4418MAILBOX AVE.
City-St-Zip: NORTH FORT MYERS, FL 33903

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: MARY ANN MAUCH

SEC

01/28/2011

Electronic Signature of Signing Officer or Director

Date