## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000002942

FILED Apr 10, 2008 Secretary of State

Entity Name: CASCADES AT ESTERO RESIDENTS' ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 1044 CASTELLO DR., STE 206 NAPLES, FL 34103 **Current Mailing Address: New Mailing Address:** 1044 CASTELLO DR., STE. 206 NAPLES, FL 34103 FEI Number: 20-2404098 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SOUTHWEST PROPERTY MANAGEMENT 1044 CASTELLO DR., STE 206 NAPLES, FL 34103 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition STACY, JACK Name: Name: 20115 BALLYLEE CT. Address: Address: City-St-Zip: ESTERO, FL 33928 City-St-Zip: ( ) Delete Title: Title: () Change () Addition MCDOWELL, BOB Name: Name: Address: 20086 BALLYLEE CT. Address: City-St-Zip: ESTERO, FL 33928 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition MORGAN, JOAN BARRY, GAIL Name: Name: 9553 LISERON DR. 9589 LISERON DRIVE Address: Address: City-St-Zip: ESTERO, FL 33928 City-St-Zip: ESTERO, FL 33928 (X) Change ( ) Addition Title: () Delete Title: Name: ROWE, DAN Name: ROWE, DAN 9112 WHITFIELD DR. Address: Address: 9112 WHITFIELD DR. City-St-Zip: ESTERO, FL 33928 City-St-Zip: ESTERO, FL 33928 Title: () Delete Title: (X) Change ( ) Addition HELLWEGE, GUY CLESE, TONY Name: Name: 20167 CASTEMAINE AVE 20052 ALANA COURT Address: Address: City-St-Zip: ESTERO, FL 33928 City-St-Zip: ESTERO, FL 33928 Title: () Delete Title: (X) Change ( ) Addition MELVIN, JOHN HAUPT, GARY Name: Name: Address: 9277 SPRINGVIEW LOOP Address: 9603 LISMORE LANE ESTERO, FL 33928 ESTERO, FL 33928 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JACK STACY P 04/10/2008