

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002942

FILED
Apr 14, 2010
Secretary of State

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

Current Principal Place of Business:

1044 CASTELLO DR., STE 206
NAPLES, FL 34103

New Principal Place of Business:

Current Mailing Address:

1044 CASTELLO DR., STE. 206
NAPLES, FL 34103

New Mailing Address:

FEI Number: 20-2404098

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOUTHWEST PROPERTY MANAGEMENT
1044 CASTELLO DR., STE 206
NAPLES, FL 34103 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: VP
Name: BULL, JACKIE
Address: 20044 SERENE MEADOW LANE
City-St-Zip: ESTERO, FL 33928

Title: P
Name: SCHOFIELD, PETER
Address: 9055 SPRINGVIEW LOOP
City-St-Zip: ESTERO, FL 33928

Title: T
Name: GIRARD, VINCENT
Address: 20040 SERENE MEADOW LANE
City-St-Zip: ESTERO, FL 33928

Title: D
Name: LANFARE, LEE C II
Address: 9194 SPRINGVIEW LOOP
City-St-Zip: ESTERO, FL 33928

Title: S
Name: DICKINSON, KARIN
Address: 8936 CASCADES ISLE BLVD
City-St-Zip: ESTERO, FL 33928

Title: D
Name: FRIED, RICK
Address: 20223 FOXWORTH CIRCLE
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: PETER SCHOFIELD

P

04/14/2010

Electronic Signature of Signing Officer or Director

Date