

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002094

FILED  
Apr 13, 2012  
Secretary of State

**Entity Name:** HORSE CREEK ESTATES HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O AVM REAL ESTATE SERVICES, INC.  
7995 PRESERVE CIRCLE  
NAPLES, FL 34119 US

**New Principal Place of Business:**

C/O R & P PROPERTY MANAGEMENT  
265 AIRPORT RD S  
NAPLES, FL 34104 US

**Current Mailing Address:**

C/O AVM REAL ESTATE SERVICES, INC.  
7995 PRESERVE CIRCLE  
NAPLES, FL 34119 US

**New Mailing Address:**

C/O R & P PROPERTY MANAGEMENT  
265 AIRPORT RD S  
NAPLES, FL 34104 US

**FEI Number:** 34-2009733

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MOORE, ARTHUR  
7995 PRESERVE CIRCLE  
NAPLES, FL 34119 US

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

R & P PROPERTY MANAGEMENT  
265 AIRPORT RD S  
NAPLES, FL 34104 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:** GLENN CARROLL

04/13/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** OEHLER, KEN  
**Address:** 380 CYPRESS WAY W.  
**City-St-Zip:** NAPLES, FL 34110 US

**Title:** VP  
**Name:** MULLIN, DALE  
**Address:** 411 SADDLEBROOK LANE  
**City-St-Zip:** NAPLES, FL 34110

**Title:** SD  
**Name:** KELLER, GARY  
**Address:** 292 SADDLEBROOK LANE  
**City-St-Zip:** NAPLES, FL 34110

**Title:** TD  
**Name:** DEPERI, CHARLES  
**Address:** 463 SADDLEBROOK LANE  
**City-St-Zip:** NAPLES, FL 34110

**Title:** D  
**Name:** SUSSMAN, DANIEL  
**Address:** 307 SADDLEBROOK LANE  
**City-St-Zip:** NAPLES, FL 34110

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:** KENNETH OEHLER

PD

04/13/2012

Electronic Signature of Signing Officer or Director

Date