

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 10, 2011
Secretary of State

Entity Name: CAPE ISLE PRESERVE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O BEACH COMMUNITY BANK
17 SE EGLIN PARKWAY
FT. WALTON BEACH, FL 32548

New Principal Place of Business:

Current Mailing Address:

C/O BEACH COMMUNITY BANK
17 SE EGLIN PARKWAY
FT. WALTON BEACH, FL 32548

New Mailing Address:

FEI Number: 20-1934569

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COLBERT, RICHARD M
4 LAGUNA STREET
SUITE 101
FT. WALTON BEACH, FL 32548 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: PD
Name: HUGHES, A. ANTHONY
Address: 17 SE EGLIN PARKWAY
City-St-Zip: FT. WALTON BEACH, FL 32548

Title: VPTD
Name: PRITCHARD, KATHLEEN A
Address: 17 SE EGLIN PARKWAY
City-St-Zip: FT. WALTON BEACH, FL 32548

Title: SD
Name: COLBERT, RICHARD M
Address: 4 LAGUNA STREET, SUITE 101
City-St-Zip: FT. WALTON BEACH, FL 32548

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: JUDYW@BEACHCOMMUNITYBANK.COM

VP

01/10/2011

Electronic Signature of Signing Officer or Director

Date