

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011208

FILED  
Mar 30, 2012  
Secretary of State

**Entity Name:** TREETOP RESIDENTIAL OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

7 TOWN CTR LOOP STE C16  
SANTA ROSA BEACH, FL 32459

**New Principal Place of Business:**

**Current Mailing Address:**

POB 1247  
SANTA ROSA BEACH, FL 32459

**New Mailing Address:**

**FEI Number:** 20-2709803

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

KRAMER, MARY A  
4475 LEGENDARY DRIVE  
DESTIN, FL 32541 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:** STD  
**Name:** ANSON, NANCY  
**Address:** 508 N. AUDUBON DRIVE  
**City-St-Zip:** ALBANY, GA 31707

**Title:** PD  
**Name:** WOOLLEY, PETER  
**Address:** POST OFFICE BOX 611718  
**City-St-Zip:** ROSEMARY BEACH, FL 32461

**Title:** VD  
**Name:** BALDOCK, RHONDA  
**Address:** 2621 MITCHAM DRIVE, SUITE 101  
**City-St-Zip:** TALLAHASSEE, FL 32308

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 WOOLLEY

PD

03/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date