

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 04, 2012
Secretary of State

Entity Name: TRIESTE AT PELICAN PRESERVE PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O SCHOO MANAGEMENT, INC.
9411 CYPRESS LAKE DR., STE 2
FORT MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

C/O SCHOO MANAGEMENT, INC.
9411 CYPRESS LAKE DR., STE 2
FORT MYERS, FL 33919

New Mailing Address:

FEI Number: 01-0827564

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GELLES, ROBERT
C/O SCHOO MANAGEMENT, INC.
9411 CYPRESS LAKE DR., STE 2
FORT MYERS, FL 33919 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: P
Name: SMITH, JOHN
Address: 9361 TRIESTE DR.
City-St-Zip: FORT MYERS, FL 33913

Title: T
Name: CASTOR, SUSAN
Address: 9366 TRIESTE DR.
City-St-Zip: FORT MYERS, FL 33913

Title: OP
Name: BURLISON, RANDY
Address: 10619 TIRANO CT.
City-St-Zip: FT MYERS, FL 33913

Title: S
Name: HOFFMANN, BEVERLY
Address: 9369 TRIESTE DR.
City-St-Zip: FT MYERS, FL 33913

Title: D
Name: HERTING, RICHARD
Address: 9312 TRIESTE DR.
City-St-Zip: FORT MYERS, FL 33913

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: BEVERLY HOFFMANN

SEC

04/04/2012

Electronic Signature of Signing Officer or Director

Date