## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000008665

FILED Sep 08, 2011 Secretary of State

Entity Name: ESTATES AT CHERRY LAKE MASTER HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

2180 WEST SR. 434, SUITE 5000 3600 GALILEO DRIVE LONGWOOD, FL 327795044

SUITE 104

NEW PORT RICHEY, FL 34655

**Current Mailing Address:** New Mailing Address:

2180 WEST SR. 434, SUITE 5000 3600 GALILEO DRIVE

LONGWOOD, FL 327795044 SUITE 104

NEW PORT RICHEY, FL 34655

FEI Number: 20-3355762 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

HART, JAMES W JR ORSI, JENNIFER SENTRY MANAGEMENT INC 3600 GALILEO DRIVE 2180 WEST SR 434 SUITE 5000 SUITE 104

LONGWOOD, FL 32779 US NEW PORT RICHEY, FL 34655 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: JENNIFER ORSI 09/08/2011

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

BUCK, PATRICIA O Name:

Address: 3600 GALILEO DRIVE, SUITE 104 City-St-Zip: NEW PORT RICHEY, FL 34655

Title: SD

Name: ORSI, PAULA

Address: 3600 GALILEO DRIVE, SUITE 104 City-St-Zip: NEW PORT RICHEY, FL 34655

Title: TD

ORSI, JENNIFER Name:

3600 GALILEO DRIVE, SUITE 104 Address: City-St-Zip: NEW PORT RICHEY, FL 34655

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: PATRICIA O BUCK PD 09/08/2011