

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002016

FILED
Feb 29, 2012
Secretary of State

Entity Name: CALDECOTT HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1532 RIO DE JANEIRO AVE
PUNTA GORDA, FL 33983

New Principal Place of Business:

Current Mailing Address:

PO BOX 380758
MURDOCK, FL 33938

New Mailing Address:

FEI Number: 20-8116018

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE GATEWAY GROUP
1532 RIO DE JANEIRO AVE
PUNTA GORDA, FL 33983 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: CHOQUETTE, GABE
Address: 2647 PROFESSIONAL CIRCLE, SUITE 1201
City-St-Zip: NAPLES, FL 34119

Title: VD
Name: CHAGNON, MIKE
Address: 2647 PROFESSIONAL CIRCLE, SUITE #1201
City-St-Zip: NAPLES, FL 34119

Title: STD
Name: SLANE, JOE
Address: 2647 PROFESSIONAL CIRCLE, SUITE #1201
City-St-Zip: NAPLES, FL 34119

Title: D
Name: COE, TOM
Address: 2647 PROFESSIONAL CIRCLE, SUITE #1201
City-St-Zip: NAPLES, FL 34119

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: GABE CHOQUETTE

PD

02/29/2012

Electronic Signature of Signing Officer or Director

Date