

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000007000

**FILED**  
**Apr 23, 2011**  
**Secretary of State**

**Entity Name:** COTTAGES OF GULF PINES OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

17 JOAN CIR  
SANA ROSA BCH, FL 32459

**New Principal Place of Business:**

**Current Mailing Address:**

17 JOAN CIR  
SANA ROSA BCH, FL 32459

**New Mailing Address:**

**FEI Number:** 20-5145559

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FRANKLIN H. WATSON, P.A.  
5365 E CO. HWY 30A STE 105  
SEAGROVE BCH, FL 32459 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:** DPT  
**Name:** RENAUD, THOMAS G MGRM  
**Address:** 17 JOAN CIR  
**City-St-Zip:** SANA ROSA BCH, FL 32459

**Title:** DVS  
**Name:** JEANNERET, BRENT E MGRM  
**Address:** 1630 LAGRANGE RD  
**City-St-Zip:** FREEPORT, FL 32439

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:** THOMAS G. RENAUD

MGRM

04/23/2011

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

\_\_\_\_\_  
Date