2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2011
Secretary of State

DOCUMENT# N06518

Entity Name: CALOOSA BAYVIEW RECREATION ASSOCIATION, INC.

Current Principal Place of Business:

4282 ISLAND CIRCLE DR
SUITE C
FT. MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

4282 ISLAND CIRCLE DR
SUITE C
FT. MYERS, FL 33919

New Mailing Address:

FEI Number: 59-2532039 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

REPPERT, JAMES L
13151 KINGS POINT DR
#11A
FT. 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: VP
Name: PUGLIESE, FRED
Address: 4268 H ISLAND CIRCLE DR
City-St-Zip: FT MYERS, FL 33919

Title: D
Name: DAMIANO, BARB
Address: 4297 B ISLAND CIRCLE DR
City-St-Zip: FT MYERS, FL 33919

Title: P
Name: ZUKOWSKI, JIM
Address: 4299 A ISLAND CIRCLE DR.
City-St-Zip: FT MYERS, FL 33919

Title: T
Name: CORDS, DEE
Address: 4257-C ISLAND CIRCLE
City-St-Zip: FT MYERS, FL 33919

Title: S
Name: SHEA, SHARON
Address: 4268 G ISLAND CIRCLE DR
City-St-Zip: FT MYERS, FL 33919

Title: D
Name: GISSE, ERIN
Address: 4261 C ISLAND CIRCLE DR
City-St-Zip: FT MYERS, FL 33919

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: JAMES L. REPPERT MR. 04/29/2011

Electronic Signature of Signing Officer or Director — Date