

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

DOCUMENT# N07000001775

**FILED**  
**Jan 05, 2011**  
**Secretary of State**

**Entity Name:** CAREFREE GREENSPACE, CORP.

**Current Principal Place of Business:**

3377 GOLDA CIRCLE  
FT MYERS, FL 33917

**New Principal Place of Business:**

**Current Mailing Address:**

3377 GOLDA CIRCLE  
FT MYERS, FL 33917

**New Mailing Address:**

**FEI Number:** 65-1061191

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WOHN, PAULINE S TREAS  
3236 ELEANOR WAY  
FORT MYERS, FL 33917 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:** SEC  
**Name:** CRUSIUS, CARLA SEC  
**Address:** 3275 ELEANOR WAY  
**City-St-Zip:** FORT MYERS, FL 33917

**Title:** TREA  
**Name:** WOHN, PAULINE S TREAS  
**Address:** 3236 ELEANOR WAY  
**City-St-Zip:** FT MYERS, FL 33917

**Title:** P  
**Name:** DAVIS, NOR-ANN PRES  
**Address:** 3388 GOLDA CIRCLE  
**City-St-Zip:** NORTH FORT MYERS, FL 33917

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:** PAULINE S WOHN

TREA

01/05/2011

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

\_\_\_\_\_  
Date