## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000004309

Apr 20, 2011 Secretary of State

Entity Name: THE CARLYSLE PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:** 

**New Principal Place of Business:** 

28700 & 28750 TRAILS EDGE BLVD. BONITA SPRINGS, FL 34134

**Current Mailing Address:** 

**New Mailing Address:** 

1044 CASTELLO DR., STE 206 NAPLES, FL 341031900

GOEDE & ADAMCZYK, PLLC 8950 FONTANA DEL SOL WAY, STE. 100

NAPLES, FL 34109

Name and Address of Current Registered Agent:

FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of New Registered Agent:

R & A AGENTS, INC

FEI Number Applied For ( )

GOEDE & ADAMCZYK, PLLC 8950 FONTANA DEL SOL WAY, STE. 100 NAPLES, FL 34109 US

850 PARK SHORE DRIVE SUITE 300

FEI Number: 26-0222239

NAPLES, FL 34103 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: MARK E. ADAMCZYK

04/20/2011

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

HILLIARD, ROBERT Name:

Address: 28700 TRAILS EDGE BLVD., #303 City-St-Zip: BONITA SPRINGS, FL 34134

Title:

Name: MENNUCCI, LINDA

Address: 28750 TRAILS EDGE BLVD., #604 City-St-Zip: BONITA SPRINGS, FL 34134

Title:

LOUTH, ROY Name:

28750 TRAILS EDGE BLVD., #501 Address: City-St-Zip: BONITA SPRINGS, FL 34134

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.

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SIGNATURE: ROBER HILLIARD

04/20/2011