

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Feb 24, 2011
Secretary of State

DOCUMENT# N07000009451

Entity Name: EAVES BEND AT ARTISAN LAKES HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**501 N. CATTLEMEN ROAD
SUITE 100
SARASOTA, FL 34232 US**New Principal Place of Business:****Current Mailing Address:**4900 N. SCOTTSDALE ROAD
SUITE 2000
SCOTTSDALE, FL 85251 US**New Mailing Address:**501 N. CATTLEMEN ROAD
SUITE 100
SARASOTA, FL 34232 US**FEI Number:****FEI Number Applied For ()****FEI Number Not Applicable (X)****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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: DP
Name: ASHER, JOHN P
Address: 501 N. CATTLEMEN ROAD, SUITE 100
City-St-Zip: SARASOTA, FL 34232 US

Title: DVT
Name: WILMETH, RICHARD M
Address: 501 N. CATTLEMEN ROAD, SUITE 100
City-St-Zip: SARASOTA, FL 34232 US

Title: DVS
Name: FICHTER, THOMAS P JR
Address: 501 N. CATTLEMEN ROAD, SUITE 100
City-St-Zip: SARASOTA, FL 34232 US

Title: V
Name: KEMPTON, JOHN S
Address: 501 N. CATTLEMEN ROAD, SUITE 100
City-St-Zip: SARASOTA, FL 34232 US

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: JOHN P ASHER

P

02/24/2011

Electronic Signature of Signing Officer or Director

Date