2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2012
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:

501 N. CATTLEMEN ROAD
SUITE 100
SARASOTA, FL 34232 US

New Mailing Address:

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: PD
Name: MCCRAW, ROY J III
Address: 501 N. CATTLEMEN ROAD, SUITE 100
City-St-Zip: SARASOTA, FL 34232 US

Title: VTD
Name: MCCHESNEY, VALERIE
Address: 501 N. CATTLEMEN ROAD, SUITE 100
City-St-Zip: SARASOTA, FL 34232 US

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

Title: VSD
Name: CAMPBELL, MICHELLE M
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: MICHELLE M. CAMPBELL VSD 02/13/2012

Electronic Signature of Signing Officer or Director — Date