

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09772

FILED
Mar 30, 2010
Secretary of State

Entity Name: GREENFIELD VILLAGE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1719 TRADE CENTER WAY
#4
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

PO BOX 8478
NAPLES, FL 34101

New Mailing Address:

1719 TRADE CENTER WAY
#4
NAPLES, FL 34109

FEI Number: 59-2593495

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WINKLER, NANCY
SANDCASTLER COMMUNITY MGT, INC.
1719 TRADE CENTER WAY #4
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

LUTZ, TRAVOR
SANDCASTLER COMMUNITY MGT, INC.
1719 TRADE CENTER WAY #4
NAPLES, FL 34109 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: TRAVOR LUTZ

03/30/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPTD
Name: WOOD, ROBERT C
Address: 1710 KING'S LAKE BLVD, #204
City-St-Zip: NAPLES, FL 34112

Title: SD
Name: TUNNEY, ALICE
Address: 1714 KINGS LAKE BLVD., #204
City-St-Zip: NAPLES, FL 34112

Title: PD
Name: KIRCHNER, GEORGE
Address: 1708 KING'S LAKE BLVD., #202
City-St-Zip: NAPLES, FL 34112

Title: D
Name: EWALD, THOMAS J
Address: 1712 KINGS LAKE BLVD #205
City-St-Zip: NAPLES, FL 34112

Title: D
Name: KEHOE, MARGARET
Address: 1714 KINGS LAKE BLVD, SUITE #102
City-St-Zip: NAPLES, FL 34112

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: ROBERT C. WOOD

VPTD

03/30/2010

Electronic Signature of Signing Officer or Director

Date