

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000000586

FILED  
Feb 29, 2012  
Secretary of State

**Entity Name:** ESPERANZA II AT PASEO NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

2647 PROFESSIONAL CIRCLE, SUITE 1201  
NAPLES, FL 34119

**New Principal Place of Business:**

**Current Mailing Address:**

2647 PROFESSIONAL CIRCLE, SUITE 1201  
NAPLES, FL 34119

**New Mailing Address:**

PO BOX 380758  
MURDOCK, FL 33938

**FEI Number:** 45-4237759

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KOCSES, CHAD  
2647 PROFESSIONAL CIRCLE, SUITE 1201  
NAPLES, FL 34119 US

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

THE GATEWAY GROUP  
1532 RIO DE JANEIRO AVE  
PUNTA GORDA, FL 33983 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: KRISTINE WISHARD

02/29/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: KOCSES, CHAD  
Address: 2647 PROFESSIONAL CIRCLE, SUITE 1201  
City-St-Zip: NAPLES, FL 34119

Title: VPD  
Name: GELDER, KEITH  
Address: 2647 PROFESSIONAL CIRCLE, SUITE 1201  
City-St-Zip: NAPLES, FL 34119

Title: STD  
Name: HOLM SHEELEY, DEBBIE  
Address: 2647 PROFESSIONAL CIRCLE, SUITE 1201  
City-St-Zip: NAPLES, FL 34119

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: CHAD KOCSES

PD

02/29/2012

Electronic Signature of Signing Officer or Director

Date