## 2008 NOT-FOR-PROFIT CORPORATION

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## Apr 10, 2008 8:00 am Secretary of State **ANNUAL REPORT DOCUMENT # N12000** 04-10-2008 90017 029 \*\*\*\*61.25 THE PLACE, UNIT III, PROPERTY OWNERS' ASSOCIATIÓN, INC. Principal Place of Business Mailing Address 1000011~ 17210-1 TERRAVERDE CIR 17210-1 TERRAVERDE CIR FORT MYERS, FL 33908 FORT MYERS, FL 33908 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03112008 CR2E037 (12/06) 4. FEI Number 65-0060601 City & State City & State Applied For Not Applicable Zio Country Zin Country \$8.75 Additional 5. Certificate of Status Desired $\Box$ Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent REITENGA, JACQUELYN G 17210-1 TERRAVERDE CIR Street Address (P.O. Box Number is Not Acceptable) FORT MYERS, FL 33908 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature regured when reinstating) DATE 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Make check payable to Due by May 1, 2008 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. D Delete TITLE TITLE ☐ Change ☐ Addition HUTTER JULIE MARJE NAME STREET ADDRESS 36 BARKLEY CIRCLE STREET ADDRESS CITY-ST-ZIP FT. MYERS, FL 33907 CITY-ST-ZIP TITLE Ð ☐ Detete TITLE ☐ Change ☐ Addition REITENGA, JACQUELYN G NAME NAME 17210-1 TERRAVERDE CIR STREET ADDRESS STREET ADDRESS FORT MYERS, FL 339084464 CITY-ST-7IP CXTY-ST-ZIP TITLE ☐ Detete THE ☐ Change ☐ Addition TANNENBAUM, ALAN L DR NAME NAME STREET ADDRESS 20 BARKLEY CIRCLE STREET ADDRESS CITY-ST-ZIP FORT MYERS, FL 33907 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition GEAR, ROBERT D NAME NAME STREET ADDRESS 26 BARKLEY CIR #A STREET ADDRESS CITY-ST-ZIP FORT MYERS, FL 33907 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME MANHANEY, GENE D NAME STREET ADDRESS 23 BARKLEY CIR STREET ADDRESS CITY-ST-ZIP FORT MYERS, FL 33907 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplied entail report is true and accurate and that my signature shall have the same legal effect as immade under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute his report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or the receiver or trustee changed, or on an attachment with an add

**FILED** 

Daytime Phone #