

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18766

FILED
May 01, 2010
Secretary of State

Entity Name: CARLENTINI SUBDIVISION OF CAPRI ISLES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1501 STRADA D'ORO
VENICE, FL 342921512 US

New Principal Place of Business:

Current Mailing Address:

1501 STRADA D'ORO
VENICE, FL 342921512 US

New Mailing Address:

FEI Number: 65-0087352 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

LACHIUSA, JANE E F
1503 STRADA D'ORO
VENICE, FL 342921512 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: DAILEY, MARVIN R
Address: 1501 STRADA D'ORO
City-St-Zip: VENICE, FL 34292

Title: S
Name: DIANE, BRUNI
Address: 1446 STRADA D'ORO
City-St-Zip: VENICE, FL 34292

Title: T
Name: BRUNI, DIANE
Address: 1446 STRADA D'ORO
City-St-Zip: VENICE, FL 342921512 US

Title: VP
Name: HINSHAW, CRAIG
Address: 1515 STRADA D'ORO
City-St-Zip: VENICE, FL 34292

Title: D
Name: PENDERGAST, DORIS
Address: 1458 STRADA D'ORO
City-St-Zip: VENICE, FL 34292

Title: D
Name: YOKOM, DANNY
Address: 1448 STRAD D'AREGENTO
City-St-Zip: VENICE, FL 34292

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: DIANE BRUNI

S

05/01/2010

Electronic Signature of Signing Officer or Director

Date