

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19217

FILED
Mar 21, 2011
Secretary of State

Entity Name: THE TREETOPS AT RANGER POINT HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

4320 TREE TOPS DRIVE
EL JOBEAN, FL 33927 US

New Principal Place of Business:

Current Mailing Address:

C/O STAR HOSPITALITY MANAGEMENT, INC.
26530 MALLARD WAY
PUNTA GORDA, FL 33950 US

New Mailing Address:

FEI Number: 65-0015703 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

STAR HOSPITALITY MANAGEMENT, INC.
26530 MALLARD WAY
PUNTA GORDA, FL 33950 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: P
Name: SMITH, VIRGINIA S
Address: 4244 TREE TOPS DRIVE
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: T
Name: QUIJANO, EZEQUIEL L
Address: 4291 TREE TOPS DRIVE
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: VP
Name: SULLIVAN, VIOLET J
Address: 4261 TREE TOPS DRIVE
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: D
Name: GRIMSHAW, ERIC
Address: 4285 TREE TOPS DRIVE
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: S
Name: BARRY, ALEXANDER
Address: 4265 OAK TERRACE
City-St-Zip: PORT CHARLOTTE, FL 33953

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: VIRGINIA SMITH

P

03/21/2011

Electronic Signature of Signing Officer or Director

Date