2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2012
Secretary of State

DOCUMENT# N23097

Entity Name: CROWNE POINTE COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

%GUARDIAN PROPERTY MANAGEMENT
6704 LONE OAK BLVD
NAPLES, FL 34109 US

New Principal Place of Business:

Current Mailing Address:

6704 LONE OAK BLVD
NAPLES, FL 34109

New Mailing Address:

FEI Number: 65-0203325 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GUARDIAN PROPERTY MANAGEMENT
6704 LONE OAK BLVD
NAPLES, FL 34109 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: FREDRICKSON, BOB
Address: 1756 ROYAL CIR
City-St-Zip: NAPLES, FL 34112

Title: T
Name: LANIGAN, ED
Address: 2896 W CROWN POINTE BLVD
City-St-Zip: NAPLES, FL 34112

Title: D
Name: BECKNEL, JERRY
Address: 3310 W CROWN POINTE BLVD
City-St-Zip: NAPLES, FL 34112

Title: VP
Name: STEWARD, DICK
Address: 2077 W CROWN POINTE BLVD
City-St-Zip: NAPLES, FL 34112

Title: D
Name: KUNERT, RON
Address: 5192 LOCHWOOD CT
City-St-Zip: NAPLES, FL 34112

Title: S
Name: MONGILLO, RON
Address: 2100 PICCADILLY CIRCUS
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: BYRON L ROSS MGR 04/19/2012

Electronic Signature of Signing Officer or Director Date