

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26347

FILED
Mar 01, 2010
Secretary of State

Entity Name: ERIN LAKE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1719 TRADE CENTER WAY #4
NAPLES, FL 34109 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 8478
NAPLES, FL 34101 US

New Mailing Address:

1719 TRADE CENTER WAY #4
NAPLES, FL 34109 US

FEI Number: 65-0132351

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WINKLER, NANCY
SAND CASTLE COMMUNITY MANAGEMENT, INC
1719 TRADE CENTER WAY #4
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

VINDELL, OLGA
SAND CASTLE COMMUNITY MANAGEMENT, INC
1719 TRADE CENTER WAY #4
NAPLES, FL 34109 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: OLGA VINDELL

03/01/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: ANDREWS, KIRK
Address: 107 ERIN WAY
City-St-Zip: NAPLES, FL 34119

Title: VPD
Name: BOOHER, DELBERT
Address: 90 ERIN WAY
City-St-Zip: NAPLES, FL 34119

Title: SD
Name: SENECA, GEORGE
Address: 5889 JAMERSON DRIVE
City-St-Zip: NAPLES, FL 34119

Title: TD
Name: SISKUS, SANFORD
Address: 5841 JAMESON DRIVE
City-St-Zip: NAPLES, FL 34119

Title: D
Name: GLOVER, GEORGE
Address: 82 ERIN WAY
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: KIRK ANDREWS

PD

03/01/2010

Electronic Signature of Signing Officer or Director

Date