

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28819

FILED
Apr 20, 2011
Secretary of State

Entity Name: FRANKLIN SQUARE EAST HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

CALIBER MGT, INC
701 ENTERPRISE ROAD E. SUITE 401
SAFETY HARBOR, FL 34695 US

New Principal Place of Business:

Current Mailing Address:

CALIBER MGT, INC
701 ENTERPRISE ROAD E. SUITE 401
SAFETY HARBOR, FL 34695 US

New Mailing Address:

FEI Number: 59-2997451

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, MARJORIE J
C/O CALIBER MGMT, INC
701 ENTERPRISE ROAD E. SUITE 401
SAFETY HARBOR, FL 34695 US

Name and Address of New Registered Agent:

JONES, SHIRLEY H
C/O CALIBER MGMT, INC
701 ENTERPRISE ROAD E. SUITE 401
SAFETY HARBOR, FL 34695 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: SHIRLEY H JONES

04/20/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD
Name: BROWN, TONI M
Address: 1424 LOMAN CT
City-St-Zip: PALM HARBOR, FL 34683

Title: VPD
Name: JEFF, ANTHONY
Address: 1420 LOMAN COURT
City-St-Zip: PALM HARBOR, FL 34683

Title: PD
Name: OGLE, FREMONT
Address: 1465 BRIER COURT
City-St-Zip: PALM HARBOR, FL 34683

Title: TD
Name: HOPKINS, ED
Address: 1465 LOMAN COURT
City-St-Zip: PALM HARBOR, FL 34683

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: FREMONT OGLE

PRES

04/20/2011

Electronic Signature of Signing Officer or Director

Date