

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29906

FILED  
Mar 30, 2012  
Secretary of State

**Entity Name:** EAGLETON ESTATES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

UNITED COMMUNITY MGT. CORP.  
11784 W. SAMPLE RD #103  
CORAL SPRINGS, FL 33065 US

**New Principal Place of Business:**

11784 WEST SAMPLE ROAD  
SUITE 103  
CORAL SPRINGS, FL 33065 US

**Current Mailing Address:**

UNITED COMMUNITY MGT. CORP.  
11784 W. SAMPLE RD #103  
CORAL SPRINGS, FL 33065 US

**New Mailing Address:**

11784 WEST SAMPLE ROAD  
SUITE 103  
CORAL SPRINGS, FL 33065 US

**FEI Number:** 11-1111292

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

UNITED COMMUNITY MGT. CORP.  
11784 W. SAMPLE RD #103  
CORAL SPRINGS, FL 33065 US

**Name and Address of New Registered Agent:**

UNITED COMMUNITY MANAGEMENT CORP.  
11784 WEST SAMPLE ROAD  
SUITE 103  
CORAL SPRINGS, FL 33065 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: ANA MONTOYA

03/30/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BERKLEY, PETER  
Address: 242 EAGLETON ESTATES BLVD  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: VP  
Name: COFFMAN, SONIA  
Address: 233 EAGLETON ESTATES BLVD  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: T  
Name: O'BRIEN, THOMAS  
Address: 272 EAGLETON ESTATES BLVD  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: S  
Name: EDELSTEIN, LOIS  
Address: 234 EAGLETON ESTATES BLVD  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: D  
Name: BONE, WALTER  
Address: 204 EAGLETON ESTATES BLVD  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: D  
Name: BERRYHILL, SCOTT  
Address: 270 EAGLETON ESTATES BLVD  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

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: ANA MONTOYA

D

03/30/2012

Electronic Signature of Signing Officer or Director

Date