

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44134

FILED
Mar 28, 2012
Secretary of State

Entity Name: MYSTIC RIDGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

14360 S. TAMIAMI TRAIL
SUITE B
FORT MYERS, FL 33912 US

New Principal Place of Business:

Current Mailing Address:

14360 S. TAMIAMI TRAIL
SUITE B
FORT MYERS, FL 33912 US

New Mailing Address:

FEI Number: 65-0308622

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAPP, PAUL L
P & M PROPERTY MANAGEMENT
14360 SOUTH TAMIAMI TRAIL UNIT B
FORT MYERS, FL 33912 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: PD
Name: HYLAND, JOAN
Address: 14360 SOUTH TAMIAMI TRAIL UNIT B
City-St-Zip: FORT MYERS, FL 33912

Title: T
Name: ARCHER, ANYA
Address: 14360 S. TAMIAMI TRAIL #B
City-St-Zip: FORT MYERS, FL 33912

Title: VP
Name: SULLIVAN, TOM
Address: 14360 SOUTH TAMIAMI TRAIL UNIT B
City-St-Zip: FORT MYERS, FL 33912

Title: S
Name: BOYNTON, JOHN
Address: 14360 SOUTH TAMIAMI TRAIL UNIT B
City-St-Zip: FORT MYERS, FL 33912

Title: D
Name: DEGEORGE, BARBARA
Address: 14360 S. TAMIAMI TRAIL UNIT B
City-St-Zip: FORT MYERS, FL 33912

Title: AS/T
Name: RANDALL DIVELEY
Address: 14360 S. TAMIAMI TRAIL UNIT B
City-St-Zip: FORT MYERS, FL 33912

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: PAUL L. SAPP

RA

03/28/2012

Electronic Signature of Signing Officer or Director

Date