

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44347

FILED  
Apr 27, 2011  
Secretary of State

**Entity Name:** SPANISH WELLS UNIT THREE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

28463 DEL LAGO WAY  
BONITA SPRINGS, FL 34135 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 84  
BONITA SPRINGS, FL 34133 US

**New Mailing Address:**

**FEI Number:** 65-0668274      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

BOOTHBY, COLIN  
28463 DEL LAGO WAY  
BONITA SPRINGS, FL 34135 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: MURPHY, DAVID  
Address: 28476 DEL LAGO WAY  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VPD  
Name: DRAKE, HAL  
Address: 9776 ALHAMBRA LANE  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: SD  
Name: LEES, ANN  
Address: 9840 ALHAMBRA LANE  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D  
Name: CONRAD, MADELENO  
Address: 9780 ALHAMBRA LANE  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D  
Name: CONNOLLY, JANET  
Address: 28360 DEL LAGO WAY  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D  
Name: GROSSI, DAVID  
Address: 9777 ALHAMBRA LANE  
City-St-Zip: BONITA SPRINGS, FL 34135

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: DAVID MURPHY

PD

04/27/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date