

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N50566

**FILED**  
**Jan 11, 2012**  
**Secretary of State**

**Entity Name:** MONTROSE OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

3497 EDINBURGH DR  
PACE, FL 32571 US

**New Principal Place of Business:**

**Current Mailing Address:**

3497 EDINBURGH DR  
PACE, FL 32571 US

**New Mailing Address:**

4960 HWY 90 #147  
PACE, FL 32571 US

**FEI Number:** 59-3170571

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FUNK, MICHAEL  
3497 EDINBURGH DR  
PACE, FL 32571 US

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

ETHEREDGE, WAYNE  
3425 EDINBURGH DR  
PACE, FL 32571 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: WAYNE ETHEREDGE

01/11/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: TREA  
Name: ETHEREDGE, WAYNE  
Address: 3425 EDINBURGH DR  
City-St-Zip: PACE, FL 32571

Title: PRES  
Name: FUNK, MICHAEL  
Address: 3497 EDINBURGH DR  
City-St-Zip: PACE, FL 32571

Title: PD  
Name: GOTTSCHALK, HELAINE  
Address: 3483 EDINBURGH DRIVE  
City-St-Zip: PACE, FL 32571

Title: VP  
Name: HOUSER, DIANE  
Address: 3533 EDINBURGH DR  
City-St-Zip: PACE, FL 32571

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: WAYNE ETHEREDGE

TREA

01/11/2012

Electronic Signature of Signing Officer or Director

Date