

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001773

**FILED**  
**Apr 18, 2012**  
**Secretary of State**

**Entity Name:** THREE SISTERS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

430 EAST RAILROAD AVE  
BOCA GRANDE, FL 33921 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 216  
BOCA GRANDE, FL 33921 US

**New Mailing Address:**

FEI Number: 65-0495584      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

PATERSON, REBECCA S  
430 EAST RAILROAD AVE.  
BOCA GRANDE, FL 33921 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: STD  
Name: JOHNSON, CHRIS  
Address: P.O BOX 216  
City-St-Zip: BOCA GRANDE, FL 33921

Title: PD  
Name: STRICH, RON  
Address: P.O.BOX 216  
City-St-Zip: BOCA GRANDE, FL 33921

Title: VPD  
Name: LIPNER, WESLEY  
Address: P.O.BOX 216  
City-St-Zip: BOCA GRANDE, FL 33921

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: CHRIS JOHNSON

STD

04/18/2012

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

\_\_\_\_\_  
Date