

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004188

FILED  
Jun 10, 2011  
Secretary of State

**Entity Name:** THE SOUTHLANDS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

10170 BROOK RIDGE LANE  
BONITA SPRINGS, FL 34135 US

**New Principal Place of Business:**

24957 FAIRWINDS LANE  
BONITA SPRINGS, FL 34135 US

**Current Mailing Address:**

10170 BROOK RIDGE LANE  
BONITA SPRINGS, FL 34135 US

**New Mailing Address:**

24957 FAIRWINDS LANE  
BONITA SPRINGS, FL 34135 US

**FEI Number:** 65-0525382

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CAMBRA, TRAVERS F  
10170 BROOK RIDGE LANE  
BONITA SPRINGS, FL 34135 US

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

ROGERS, LAWRENCE E  
24957 FAIRWINDS LANE  
BONITA SPRINGS, FL 34135 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:** LAWRENCE E. ROGERS

06/10/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** ROGERS, LAWRENCE E  
**Address:** 24957 FAIRWINDS LANE  
**City-St-Zip:** BONITA SPRINGS, FL 34135 US

**Title:** T  
**Name:** MATURSKI, FRED  
**Address:** 24996 FAIRWINDS LANE  
**City-St-Zip:** BONITA SPRINGS, FL 34135 US

**Title:** VP  
**Name:** STEVENS, ROSEMARY  
**Address:** 24980 FAIRWINDS LANE  
**City-St-Zip:** BONITA SPRINGS, FL 34125 US

**Title:** S  
**Name:** STRENFEL, TONIA  
**Address:** 24964 FAIRWINDS LANE  
**City-St-Zip:** BONITA SPRINGS, FL 34135 US

**Title:** D  
**Name:** NEMEROFF, DAVID  
**Address:** 24988 FAIRWINDS LANE  
**City-St-Zip:** BONITA SPRINGS, FL 34135 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:** LAWRENCE E. ROGERS

PRES

06/10/2011

Electronic Signature of Signing Officer or Director

Date