

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005893

FILED
Jan 19, 2012
Secretary of State

Entity Name: ANSLEY WELL USERS ASSOCIATION, INC.

Current Principal Place of Business:

17500 SPRING VALLEY RD.
DADE CITY, FL 33523

New Principal Place of Business:

Current Mailing Address:

17500 SPRING VALLEY RD.
DADE CITY, FL 33523

New Mailing Address:

FEI Number: 59-3306441

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRUZ, MICHAEL
17500 SPRING VALLEY RD.
DADE CITY, FL 33523 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: D
Name: CRUZ, MICHAEL
Address: 17500 SPRING VALLEY RD.
City-St-Zip: DADE CITY, FL 33523

Title: D
Name: CRUZ, CAROL A
Address: 17500 SPRING VALLEY RD.
City-St-Zip: DADE CITY, FL 33523

Title: D
Name: WOOD, JOE
Address: 17500 SPRING VALLEY RD.
City-St-Zip: DADE CITY, FL 33523

Title: T
Name: WOOD, DOT
Address: 17500 SPRING VALLEY RD.
City-St-Zip: DADE CITY, FL 33523

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: MICHAEL CRUZ

DIRE

01/19/2012

Electronic Signature of Signing Officer or Director

Date