2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004387

US

FILED Apr 29, 2011 Secretary of State

Entity Name: CLIPPER COVE HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O AMERICAN PROPERTY MANAGEMENT SVC 4306 ARNOLD AVE. NAPLES, FL 34104 US

8825 TAMIAMI TRAIL EAST NAPLES, FL 341113

Current Mailing Address: New Mailing Address:

C/O AMERICAN PROPERTY MANAGEMENT SVC PO BOX 110339 NAPLES, FL 34108

8825 TAMIAMI TRAIL EAST NAPLES, FL 341113

FEI Number: 65-0648895 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

KUETER, BEVERLY AMERICAN PROPERTY MANAGEMENT

4306 ARNOLD AVE. 8825 TAMIAMI TRAIL EAST US NAPLES, FL 34104 NAPLES, FL 34113

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: ORLANDO MISERANDINO 04/29/2011

> Date Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

HADLEY, CAROL Name: Address: 3839 CLIPPER LANE City-St-Zip: NAPLES, FL 34112

Title:

Name: NOER, KATHLEEN Address: 3849 CLIPPER COVE DR. City-St-Zip: NAPLES, FL 34112

Title:

KRAUS, TIM Name:

3853 CLIPPER COVE DR Address: City-St-Zip: NAPLES, FL 34112

Title:

Name: COLORET, CARLOS 3888 CLIPPER COVE DR. Address: City-St-Zip: NAPLES, FL 34112

Title:

LEVERTE, BOD Name: 3857 CLIPPER COVE DR Address: NAPLES, FL 34112 City-St-Zip:

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.

Ρ SIGNATURE: KATHY NOER 04/29/2011