

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000377

FILED  
Mar 07, 2012  
Secretary of State

**Entity Name:** CEDARWOOD COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

1538 CRESTWOOD CIRCLE N.  
LEHIGH ACRES, FL 33936

**New Principal Place of Business:**

**Current Mailing Address:**

1538 CRESTWOOD CIRCLE N  
LEHIGH ACRES, F 33936

**New Mailing Address:**

FEI Number: 65-0304144

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DORMANN, MICHELE  
1538 CRESTWOOD CIRCLE N  
LEHIGH ACRES, FL 33936 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: PD  
Name: DORMANN, MICHELE  
Address: 1538 CRESTWOOD CIRCLE N.  
City-St-Zip: LEHIGH ACRES, FL 33936

Title: VPD  
Name: MELETES, STEPHEN  
Address: 15 CRESTWOOD CR. S.  
City-St-Zip: LEHIGH ACRES, FL 33936

Title: SD  
Name: MELETES, SHIRLEY  
Address: 15 CRESTWOOD CR. S.  
City-St-Zip: LEHIGH ACRES, FL 33936

Title: TD  
Name: RENO, ANN M  
Address: 1535 CRESTWOOD CIR. N.  
City-St-Zip: LEHIGH ACRES, FL 33936

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: MICHELE DORMANN

PRES

03/07/2012

Electronic Signature of Signing Officer or Director

Date