2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2012
Secretary of State

DOCUMENT# N96000003540

Entity Name: CALUSA BAY MASTER ASSOCIATION, INC.

Current Principal Place of Business:

6955 SATINLEAF RD N
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

6955 SATINLEAF RD N
NAPLES, FL 34109

New Mailing Address:

FEI Number: 65-0682595 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCULLIN & SOBELMAN P A
1250 TAMIAMI TRAIL NORTH
SUITE #302
NAPLES, FL 34102 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: T
Name: MATTHEUS, BETH
Address: 6880 REDBAY PARK RD #102
City-St-Zip: NAPLES, FL 34109

Title: D
Name: JOUANNET, SHERRY
Address: 6839 LANTANA BRIDGE ROAD
City-St-Zip: NAPLES, FL 34109

Title: D
Name: MCCORMACK, MILLER
Address: 6891 RAIN LILY ROAD #101
City-St-Zip: NAPLES, FL 34109

Title: D
Name: CONDON, CHRISTA
Address: 6890 RAIN LILY RD. #202
City-St-Zip: NAPLES, FL 34109

Title: P
Name: GIBBONS, GARY
Address: 6922 SATINLEAF RD. NORTH #102
City-St-Zip: NAPLES, FL 34109

Title: VP
Name: LOTTI, ANGELO
Address: 6879 REDBAY PARK ROAD
City-St-Zip: NAPLES, FL 34109

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: ANGELO LOTTI PRES 04/24/2012

Electronic Signature of Signing Officer or Director — Date