

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006035

FILED  
Apr 13, 2012  
Secretary of State

Entity Name: CAPE SABLE HOMEOWNERS ASSOCIATION, INC.

## Current Principal Place of Business:

J&L PROPERTY MGMT INC  
10191 W SAMPLE RD STE 203  
CORAL SPRINGS, FL 33065 US

## New Principal Place of Business:

INTEGRITY PROPERTY MANAGEMENT  
5665 CORAL RIDGE DRIVE  
CORAL SPRINGS, FL 33076 US

## Current Mailing Address:

J&L PROPERTY MGMT INC  
10191 W SAMPLE RD STE 203  
CORAL SPRINGS, FL 33065 US

## New Mailing Address:

INTEGRITY PROPERTY MANAGEMENT  
5665 CORAL RIDGE DRIVE  
CORAL SPRINGS, FL 33076 US

FEI Number: 65-0707957

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CALDERAZZO, JAMES  
10191 W SMPLE RD SUITE 203  
% J&L PROPERTY MGMT INC  
CORAL SPRINGS, FL 33065 US

## Name and Address of New Registered Agent:

WHITTLE, CYNTHIA G  
CAPE SABLE HOMEOWNERS ASSOCIATION, INC  
C/O INTEGRITY PROPERTY MANAGEMENT  
CORAL SPRINGS, FL 33076 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: CYNTHIA G WHITTLE

04/13/2012

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: T  
Name: BARNSWELL, NATHAN  
Address: 5665 CORAL RIDGE DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: VP  
Name: SCHWARZ, WILLIAM  
Address: 5665 CORAL RIDGE DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: P  
Name: RENY, CARLENE  
Address: 5665 CORAL RIDGE DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: S  
Name: WALKER, KEITH  
Address: 5665 CORAL RIDGE DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: D  
Name: CAMPBELL, JAMES  
Address: 5665 CORAL RIDGE DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33076

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: CARLENE RENY

P

04/13/2012

Electronic Signature of Signing Officer or Director

Date