2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2012
Secretary of State

DOCUMENT# N97000002033

Entity Name: AUTUMN WOODS COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

C/O COMPASS GROUP
3701 TAMIAMI TRAIL N, 3RD FLOOR
NAPLES, FL 34103 US

New Principal Place of Business:

Current Mailing Address:

C/O COMPASS GROUP
3701 TAMIAMI TRAIL N, 3RD FLOOR
NAPLES, FL 34103 US

New Mailing Address:

FEI Number: 65-0785764 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COMPASS GROUP
3701 TAMIAMI TRAIL N, 3RD FLOOR
NAPLES, FL 34103 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: BURTON, DAVID
Address: 6984 BURNT SIENNA CIRCLE
City-St-Zip: NAPLES, FL 34109

Title: VP
Name: GATLIN, CLYDE
Address: 6464 AUTUMN WOODS BLVD
City-St-Zip: NAPLES, FL 34109

Title: D
Name: STATON, LA
Address: 7127 BLUE JUNIPER COURT 202
City-St-Zip: NAPLES, FL 34109

Title: T/S
Name: SMITH, JACQUELYN
Address: 6969 BURNT SIENNA CIRCLE
City-St-Zip: NAPLES, FL 34109

Title: P
Name: BROWN, JAMES
Address: 6526 AUTUMN WOODS BLVD.
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: FRANCINE MAMBUCA VP 04/23/2012

Electronic Signature of Signing Officer or Director — Date