

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005167

FILED
Mar 21, 2012
Secretary of State

Entity Name: CAROUSEL COVE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

17595 S. TAMiami TRAIL
100
FORT MYERS, FL 33908 US

New Principal Place of Business:

Current Mailing Address:

17595 S. TAMiami TRAIL
100
FORT MYERS, FL 33908 US

New Mailing Address:

FEI Number: 59-3495158

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLEN, STEVEN
C/O PEGASUS PROPERTY MANAGEMENT
17595 S. TAMiami TRAIL #100
FORT MYERS, FL 33908 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: BOULEY, ALLEN
Address: 26183 BONITA FAIRWAYS CIRCLE
City-St-Zip: BONITA SPRINGS, FL 34135

Title: DS
Name: WALKER, LINDA
Address: 26881 BONITA FAIRWAYS CIRCLE
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D
Name: BATTISTE, DON
Address: 26163 BONITA FAIRWAYS CIRCLE
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D
Name: SPANGLER, VAUGHN
Address: 26249 BONITA FAIRWAYS CIRCLE
City-St-Zip: BONITA SPRINGS, FL 34135

Title: DVP
Name: WHITE, REGINA
Address: 26208 BONITA FAIRWAYS CIR.
City-St-Zip: BONITA SPRINGS, FL 34135

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: S ALLEN

A

03/21/2012

Electronic Signature of Signing Officer or Director

Date