

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000652

FILED
Apr 09, 2010
Secretary of State

Entity Name: AUTUMN LAKE RECREATION ASSOCIATION, INC.

Current Principal Place of Business:

% INTEGRATED PROPERTY MGMT
3435-10TH ST NORTH # 201
NAPLES, FL 34103

New Principal Place of Business:

C/O INTEGRATED PROPERTY MGMT
5020 TAMIAMI TR NORTH, STE 206
NAPLES, FL 34103

Current Mailing Address:

% INTEGRATED PROPERTY MGMT
3435-10TH ST NORTH # 201
NAPLES, FL 34103

New Mailing Address:

C/O INTEGRATED PROPERTY MGMT
5020 TAMIAMI TR NORTH, STE 206
NAPLES, FL 34103

FEI Number: 59-3566785

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHIELDS, CHRISTOPHER J
1833 HENDRY ST PO DRAWER 1507
FORT MYERS, FL 33902 US

Name and Address of New Registered Agent:

SHIELDS, CHRISTOPHER J
1833 HENDRY ST
FORT MYERS, FL 33901 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: CHRISTOPHER J SHIELDS

04/09/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP
Name: KOLAVO, FRANK
Address: 23551 SANDYCREEK TERRACE #707
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D
Name: WHEELER, CARL
Address: 23521 SANDYCREEK TERRACE #1001
City-St-Zip: BONITA SPRINGS, FL 34135

Title: DVP
Name: GRECO, LOU
Address: 23531 SANDY CREEK TERRACE #910
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D
Name: MCDERMOTT, JOHN
Address: 23501 SANDYCREEK TERRACE, #1201
City-St-Zip: BONITA SPRINGS, FL 34135

Title: DST
Name: CRUDO, JOSEPH
Address: 23546 SANDY CREEK TERRACE #506
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: FRANK KOLAVO

DP

04/09/2010

Electronic Signature of Signing Officer or Director

Date