

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006228

FILED  
Apr 25, 2012  
Secretary of State

**Entity Name:** FREEDOM ACRES HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

2609 NW 29TH TERR  
CAPE CORAL, FL 33993

**New Principal Place of Business:**

2653 NW 29TH TERRACE  
CAPE CORAL, FL 33993

**Current Mailing Address:**

2609 NW 29TH TERRACE  
CAPE CORAL, FL 33993

**New Mailing Address:**

2653 NW 29TH TERRACE  
CAPE CORAL, FL 33993

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MEZZATESTA, JULIE A  
2609 NW 29TH TERR  
CAPE CORAL, FL 33993    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: P  
Name: DAUFFENBACH, WALTER  
Address: 4183 BAY BEACH LANE # 3H1  
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: V  
Name: KINTER, JOHN  
Address: 2653 NW 29TH TERRACE  
City-St-Zip: CAPE CORAL, FL 33993

Title: S  
Name: MEZZATESTA, JULIE A  
Address: 2609 NW 29TH TERR  
City-St-Zip: CAPE CORAL, FL 33993

Title: T  
Name: KINTER, TRACY  
Address: 2653 NW 29TH TERRACE  
City-St-Zip: CAPE CORAL, FL 33993

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: JULIE A. MEZZATESTA

SEC

04/25/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date