## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000004948

FILED Mar 28, 2012 Secretary of State

Entity Name: JUNGLE PLUM EAST OF FOREST GLEN NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

12734 KENWOOD LANE
SUITE 49
FORT MYERS, FL 33907

2335 TAMIAMI TRAIL N
SUITE 102
NAPLES, FL 34103

Current Mailing Address: New Mailing Address:

TROPICAL ISLES/MGMT SERVICES, INC

12734 KENWOOD LN., STE 49

FORT MYERS, FL 33907

CAMBRIDGE MANAGEMENT OF SWFL 2335 TAMIAMI TRAIL N STE. 402

NAPLES, FL 34103

FEI Number: 65-1079020 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

TROPICAL ISLES MANAGEMENT SERVICES

12734 KENWOOD LANE SUITE 49
FORT MYERS, FL 33907 US

CAMBRIDGE MANAGEMENT OF SWFL 2335 TAMIAMI TRAIL N STE. 402
NAPLES, FL 34103 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: DAVE HALAHAN 03/28/2012

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Γitle: VP

Name: CAMPBELL, MICHAEL

Address: 2335 TAMIAMI TRAIL N STE. 402

City-St-Zip: NAPLES, FL 34103

Title: S/T

Name: FREVERT, JAMES

Address: 2335 TAMIAMI TRAIL N STE. 402

City-St-Zip: NAPLES, FL 34103

Title: F

Name: RUSSELL, MARK

Address: 2335 TAMIAMI TRAIL N STE. 402

City-St-Zip: NAPLES, FL 34103

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: JAMES MEADE CAM 03/28/2012