

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007141

FILED  
Mar 30, 2012  
Secretary of State

**Entity Name:** EAGLES NEST AT TAMPA BAY ASSOCIATION, INC.

**Current Principal Place of Business:**

409 E. COLLEGE AVE  
RUSKIN, FL 33570

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1058  
RUSKIN, FL 33575

**New Mailing Address:**

**FEI Number:** 59-3701644

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILSON, LOU ELLEN  
409 E COLLEGE AVE  
RUSKIN, FL 33570 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: DST  
Name: CORNELL, CAROLE  
Address: 29322 CADDY SHACK  
City-St-Zip: SAN ANTONIO, FL 33576

Title: DVP  
Name: COGGINS, KEVIN  
Address: 29341 MARKER LOOP  
City-St-Zip: SAN ANTONIO, FL 33576

Title: DP  
Name: INGALLS, STEVE  
Address: 29425 CADDYSHACK LANE  
City-St-Zip: SAN ANTONIO, FL 33576

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: LOU ELLEN WILSON

AGT

03/30/2012

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

\_\_\_\_\_  
Date