

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000080144

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Entity Name:** DANSAR HOMES OF THE TREASURE COAST, INC.

**Current Principal Place of Business:**

160 SW SOUTH MEADE CIRCLE  
PORT ST. LUCIE, FL 34953

**New Principal Place of Business:**

269 SW IMPALA CT.  
PORT ST. LUCIE, FL 34953

**Current Mailing Address:**

160 SW SOUTH MEADE CIRCLE  
PORT ST. LUCIE, FL 34953

**New Mailing Address:**

269 SW IMPALA CT.  
PORT ST. LUCIE, FL 34953

**FEI Number:** 27-1910559

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEE, DANIEL R  
160 SW SOUTH MEADE CIRCLE  
PORT ST. LUCIE, FL 34953 US

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

LEE, DANIEL R  
269 SW IMPALA CT.  
PORT ST. LUCIE, FL 34953 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:** DANIEL R LEE

04/20/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** LEE, DANIEL  
**Address:** 269 SW IMPALA CT.  
**City-St-Zip:** PORT ST. LUCIE, FL 34953 US

**Title:** VP  
**Name:** LEE, SARAH G  
**Address:** 269 SW IMPALA CT.  
**City-St-Zip:** PORT ST. LUCIE, FL 34953 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** DANIEL R LEE

PRES

04/20/2011

Electronic Signature of Signing Officer or Director

Date