

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000004031

FILED
Apr 26, 2010
Secretary of State

Entity Name: SUNTREE SQUARE, INC.

Current Principal Place of Business:

% NORTH AMERICAN PROPERTIES-SOUTHEAST, INC.
7500 COLLEGE PARKWAY
FORT MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address:

% NORTH AMERICAN PROPERTIES-SOUTHEAST, INC.
7500 COLLEGE PARKWAY
FORT MYERS, FL 33907

New Mailing Address:

FEI Number: 65-0373493

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAFELE, DALE G
% NORTH AMERICAN PROPERTIES-SOUTHEAST, INC.
7500 COLLEGE PARKWAY
FORT MYERS, FL 33907 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD
Name: WILLIAMS, THOMAS L
Address: 212 E. 3RD ST., SUITE 300
City-St-Zip: CINCINNATI, OH 45202

Title: SD
Name: WILLIAMS, W. JOSEPH JR.
Address: 212 E. 3RD ST., SUITE 300
City-St-Zip: CINCINNATI, OH 45202

Title: D
Name: MOCK, KERRY G
Address: 5846 WAYSIDE AVENUE
City-St-Zip: CINCINNATI, OH 45230

Title: VD
Name: HAFELE, DALE G
Address: 7500 COLLEGE PARKWAY
City-St-Zip: FT MYERS, FL 33907

Title: V
Name: RILEY, KEVIN
Address: 212 EAST THIRD STREET, SUITE 300
City-St-Zip: CINCINNATI, OH 45202

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: THOMAS L. WILLIAMS

PD

04/26/2010

Electronic Signature of Signing Officer or Director

Date