

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756249

FILED
Mar 03, 2009
Secretary of State

Entity Name: DOVE HOLLOW CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434, SUITE 5000
LONGWOOD, FL 327795044

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434, SUITE 5000
LONGWOOD, FL 327795044

New Mailing Address:

FEI Number: 59-2152906 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR
SENTRY MANAGEMENT INC
2180 W SR 434 SUITE 5000
LONGWOOD, FL 32779 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: TSD () Delete
Name: ERNST, STANLEY
Address: 3577 HALLA LN
City-St-Zip: BLOOMFIELD HILLS, MI 48301

Title: PD () Delete
Name: COWHEY, DENNIS
Address: 108 S 3RD ST
City-St-Zip: BLOOMINGDALE, IL 60108

Title: VPD () Delete
Name: COBB, LEE
Address: 16430 TIMBERLAKES DR #204
City-St-Zip: FORT MYERS, FL 33908

Title: VPD () Delete
Name: KAMOS, JOHN
Address: 16448 TIMBERLAKES DR #202
City-St-Zip: FORT MYERS, FL 33908

Title: D () Delete
Name: CRANE, DENNIS
Address: 562 N LOGAN AVE
City-St-Zip: DANVILLE, IL 61832

Title: D () Delete
Name: CARLEY, ROBERT
Address: 2306 EAGLE RIDGE RD
City-St-Zip: CHAMPAIGN, IL 61822

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TSD (X) Change () Addition
Name: BRODERICK, STEVE
Address: 188 BLESSING DR
City-St-Zip: TALLMADGE, OH 44278

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: SCHOETTLE, MARILYN
Address: 668 PHILLIP CIR
City-St-Zip: FORSYTH, IL 62535

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DENNIS COWHEY

PD

03/03/2009

Electronic Signature of Signing Officer or Director

Date