

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765655

FILED
Feb 01, 2009
Secretary of State

Entity Name: OCEAN COVE HOME OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

150 OCEAN COVE DR
JUPITER, FL 33477 US

New Principal Place of Business:

Current Mailing Address:

150 OCEAN COVE DRIVE
JUPITER, FL 33477 US

New Mailing Address:

150 OCEAN COVE DR
JUPITER, FL 33477 US

FEI Number: 59-2344834

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROACH, DAVID
150 OCEAN COVE DRIVE
JUPITER, FL 33477 US

Name and Address of New Registered Agent:

NILSEN, ROBERT
150 OCEAN COVE DRIVE
JUPITER, FL 33477 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: ROBERT NILSEN

02/01/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ROACH, DAVID
Address: 117 OCEAN COVE DR
City-St-Zip: JUPITER, FL

Title: TD (X) Delete
Name: NILSON, ROBERT
Address: 17001 FRESHWIND CIRCLE
City-St-Zip: JUPITER, FL 33477

Title: SD () Delete
Name: MEUNIER, JOHN
Address: 130 OCEAN COVE DRIVE
City-St-Zip: JUPITER, FL 33477

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: NILSEN, ROBERT
Address: 17001 FRESHWIND CIRCLE
City-St-Zip: JUPITER, FL 33477

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

Title: PD (X) Change () Addition
Name: MEUNIER, JOHN
Address: 130 OCEAN COVE DRIVE
City-St-Zip: JUPITER, FL 33477

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: ROBERT NILSEN

TD

02/01/2009

Electronic Signature of Signing Officer or Director

Date