


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2008 8:00 am
Secretary of State

04-21-2008 90080 004 ****61.25

DOCUMENT # N04000006986

1. Entity Name
COVERED BRIDGE TOWNHOMES PROPERTY OWNERS ASSOCIATION, INC.



Principal Place of Business
**2637 MCCORMICK DRIVE
 CLEARWATER, FL 33759**

Mailing Address
**3001 EXECUTIVE DR
 STE 260
 CLEARWATER, FL 33762**

2. Principal Place of Business - No P.O. Box #
3001 Executive Dr.

3. Mailing Address
 Suite, Apt. #, etc.
Suite 260


City & State
Clearwater, FL

City & State
Pinellas

Zip
33762

Country
Pinellas

40074923



01182008 Chg-IMP CR2E037 (12/06)

6. Name and Address of Current Registered Agent
**CONDOMINIUM ASS.
 3001 EXECUTIVE DR
 STE 260
 CLEARWATER, FL 33762**

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City
FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Joel H. Dennis*
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE

Filing Fee is \$61.25 Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BRITCHETTO, ARLINE 3316 LOVEREED BRIDGE DR E DUNEDIN, FL 34698 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RENE Gimbreda 3358 COVERED BRIDGE DR. W Dunedin, FL 34698 <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BERRY, TED 3320 LOVERED BRIDGE DR E DUNEDIN, FL 34698 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secy/Treas Russ Scudder 3353 Covered Bridge Dr. W Dunedin, FL 34698 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP DENNIS, JOEL 3346 LOVERED BRIDGE DR W DUNEDIN, FL 34698 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Joel H. Dennis* *Joel H. Dennis* 4/3/08 813-318-6209
 Signature and typed or printed name of signing officer or director Date Daytime Phone #