

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007248

FILED
Apr 12, 2009
Secretary of State

Entity Name: COLEE COVE LANDING HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8320 SHEILA DRIVE
ST. AUGUSTINE, FL 32092 US

New Principal Place of Business:

Current Mailing Address:

8320 SHEILA DRIVE
ST. AUGUSTINE, FL 32092 US

New Mailing Address:

FEI Number: 20-1446031

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TUCKER, HOWARD W III
8320 SHEILA DRIVE
ST. AUGUSTINE, FL 32092 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: S () Delete
Name: BOYD, JACK
Address: 8413 EVELYN COURT
City-St-Zip: ST. AUGUSTINE, FL 32092 US

Title: P () Delete
Name: VOELZ, TIM
Address: 8313 SHEILA DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32092 US

Title: D () Delete
Name: SUMMERS, JAMES
Address: 8317 SHEILA DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32092 US

Title: T () Delete
Name: TUCKER, HOWARD W III
Address: 8320 SHEILA DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32092 US

Title: V () Delete
Name: VASQUEZ, MAT
Address: 8325 SHEILA DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32092 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PUTALA, MARK
Address: 8301 SHEILA DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32092 US

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

Title: S (X) Change () Addition
Name: SUMMERS, JAMES
Address: 8317 SHEILA DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32092 US

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

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: HOWARD WESLEY TUCKER III

TREA

04/12/2009

Electronic Signature of Signing Officer or Director

Date