## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000001996

FILED Apr 21, 2009 Secretary of State

Entity Name: SAN MESSINA COVE COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

2840 UNIVERSITY DR. 7601A NORTH FEDERAL HIGHWAY

CORAL SPRINGS, FL 33065 SUITE 165

BOCA RATON, FL 33487

**Current Mailing Address: New Mailing Address:** 

7601A NORTH FEDERAL HIGHWAY 2840 UNIVERSITY DR.

CORAL SPRINGS, FL 33065 SUITE 165

BOCA RATON, FL 33487

FEI Number: 20-2480915 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GILLESPIE, R. BOWEN III GILLESPIE, R. BOWEN III

1515 S. FEDERAL HWY., SUITE 306 7601A NOŔTH FEDERAL HIGHWAY

BOCA RATON, FL 33432 SUITE 165 BOCA RATON, FL 33487 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: R. BOWEN GILLESPIE 04/21/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition () Delete

MAIER, HANS-PETER Name: Name: KLENZESTRASSE 99 Address: Address: City-St-Zip: MUNICH, GR 80469 City-St-Zip:

Title: VPD () Delete Title: () Change () Addition

Name: JAIS, WOLFGANG Name: Address: KLENZSTRASSE 99 Address: City-St-Zip: MUNICH, GR 80469 City-St-Zip:

Title: ( ) Delete Title: (X) Change ( ) Addition BOWEN, GILLESPIE R Name: BOWEN, GILLESPIE R Name:

1515 S. FEDERAL HWY 300 7601A NORTH FEDERAL HIGHWAY, SUITE 165 Address: Address:

City-St-Zip: BOCA RATON, FL 33065 City-St-Zip: BOCA RATON, FL 33487

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: R. BOWEN GILLESPIE VP 04/21/2009