## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000002645

FILED Feb 02, 2009 Secretary of State

Entity Name: CAPE SOUND ON AMELIA ISLAND CONDOMINIUM ASSOCIATION, INC.

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

474382 SR 2000 1950 CAPE SOUND DRIVE

FERNANDINA BEACH, FL 32034 FERNANDINA BEACH, FL 32034

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

P. O. BOX 6086

FERNANDINA BEACH, FL 32035

FEI Number: 20-5796119 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:

JACOBS, ARTHUR I DARLINGTON, RUTH W 961687 GATEWAY BLVD SUITE 201N 95002 SEA HAWK PLACE

FERNANDINA BEACH, FL 32034 FERNANDINA BEACH, FL 32034 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: RUTH W. DARLINGTON 02/02/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PTD () Delete (X) Change ( ) Addition

AMES, CHARLES D SANDLER, PAUL D Name: Name: 14881 QUORUM DRIVE, SUITE 950 Address: FOUR SAWGRASS VILLAGE, SUITE 240F Address:

City-St-Zip: DALLAS, TX 75254 City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: VD Title: VD (X) Change ( ) Addition ( ) Delete

Name: SMITH, LUANNE Name: HOWE, ANDREW

Address: P. O. BOX 6102 Address: 328 2ND AVENUE NORTH

City-St-Zip: FERNANDINA BEACH, FL 32035 City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: () Delete Title: SD (X) Change ( ) Addition

BLATT, JEFFREY T Name: HUGHES, JANET Name: 500 W 16TH STREET SUITE 102 Address:

1237 HARRISON POINT TRAIL Address: City-St-Zip: AUSTIN, TX 78701 City-St-Zip: AMELIA ISLAND, FL 32034

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: ANDREW HOWE VD 02/02/2009