

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 17, 2009
Secretary of State**

DOCUMENT# N06000003935

Entity Name: CEDAR COVE HOMEOWNER'S ASSOCIATION OF SARASOTA, INC.

Current Principal Place of Business:

7020 CAPTAIN KIDD AVENUE
SARASOTA, FL 34231

New Principal Place of Business:

7020 CAPTAIN KIDD AVENUE
58
SARASOTA, FL 34231

Current Mailing Address:

7020 CAPTAIN KIDD AVENUE
SARASOTA, FL 34231

New Mailing Address:

7020 CAPTAIN KIDD AVENUE
58
SARASOTA, FL 34231

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GORDON, SCOTT E
240 S PINEAPPLE AVENUE
SARASOTA, FL 34236 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: VD () Delete
Name: PEARSON, GEOFFREY
Address: 7020 CAPTAIN KIDD AVE 25
City-St-Zip: SARASOTA, FL 34231

Title: PD () Delete
Name: KENNEDY, BEATRICE
Address: 7020 CAPTAIN KIDD AVE 10
City-St-Zip: SARASOTA, FL 34231

Title: TD () Delete
Name: HOPPS, BETTY
Address: 7020 CAPTAIN KIDD AVE 55
City-St-Zip: SARASOTA, FL 34231

Title: S () Delete
Name: SULLIVAN, LINDA
Address: 7020 CAPTAIN KIDD AVE 58
City-St-Zip: SARASOTA, FL 34231

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: G.H.R. PEARSON

VD

01/17/2009

Electronic Signature of Signing Officer or Director

Date