

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007245

FILED
Mar 11, 2009
Secretary of State

Entity Name: COBBLESTONE AT EAGLE HARBOR CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1717 COUNTY ROAD 220
SUITE 203
ORANGE PARK, FL 32003

New Principal Place of Business:

1717 COUNTY ROAD 220
CLUBHOUSE
ORANGE PARK, FL 32003

Current Mailing Address:

1717 COUNTY ROAD 220
SUITE 203
ORANGE PARK, FL 32003

New Mailing Address:

1717 COUNTY ROAD 220
CLUBHOUSE
ORANGE PARK, FL 32003

FEI Number: 20-5181445

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRAVETZ REALTY GROUP
351 SOUTH U. S. HWY ONE
SUITE 102-B
JUPITER, FL 33477 US

Name and Address of New Registered Agent:

KW PROPERTY MANAGEMENT & CONSULTING
396 ALHAMBRA CIRCLE
SUITE 230
CORAL GABLES, FL 33134 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: HEATHER L. SANDERS

03/11/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KAMMERMAN, MARCY H
Address: 21 WEST LAS OLAS BLVD
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: VPD () Delete
Name: FAGERLI, BUD
Address: 21 WEST LAS OLAS BLVD
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: ST () Delete
Name: HELMAN, JAMES R
Address: 21 WEST LAS OLAS BLVD
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: D (X) Delete
Name: DETARDO, MARK
Address: 1634 WATERS EDGE DRIVE
City-St-Zip: ORANGE PARK, FL 32003

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DE TARDO, MARK
Address: 1634 WATERS EDGE DRIVE
City-St-Zip: ORANGE PARK, FL 32003

Title: VPD (X) Change () Addition
Name: CONNOLLY, BRIAN
Address: 1717 COUNTY ROAD 220 #2001
City-St-Zip: ORANGE PARK, FL 32003

Title: ST (X) Change () Addition
Name: KRONMILLER, ROBERT
Address: 1330 EAGLE CROSSING DRIVE
City-St-Zip: ORANGE PARK, FL 32065

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: MARK DE TARDO

PRES

03/11/2009

Electronic Signature of Signing Officer or Director

Date