

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15694

FILED  
Mar 10, 2008  
Secretary of State

**Entity Name:** GOLDEN PONDS OF FORT PIERCE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1800 GOLDEN PONDS DR  
FT PIERCE, FL 34945 US

**New Principal Place of Business:**

**Current Mailing Address:**

1800 GOLDEN POND DR  
FT PIERCE, FL 34945 US

**New Mailing Address:**

**FEI Number:** 59-2807559

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COOPER, KENNETH  
1688 CHRISTMAS COVE  
FORT PIERCE, FL 34945 US

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

DEARCOP, DELLA M  
1697 GOOLDEN POND DR  
FORT PIERCE, FL 34945 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: DELLA M. DEARCOP

03/10/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: COOPER, KENNETH  
Address: 1688 CHRISTMAS COVE  
City-St-Zip: FORT PIERCE, FL 34945

Title: V ( ) Delete  
Name: PAYNE, JOAN  
Address: 10105 GAS LIGHT CT  
City-St-Zip: FORT PIERCE, FL 34945

Title: TD ( ) Delete  
Name: DEARCOP, DELLA M  
Address: 1697 GOLDEN POND DR  
City-St-Zip: FORT PIERCE, FL 34945

Title: ATD ( ) Delete  
Name: LEVAN, KATHERYN  
Address: 1705 GOLDEN POND DRIVE  
City-St-Zip: FORT PIERCE, FL 34945

Title: VP ( ) Delete  
Name: ADAMS, MOLLIE  
Address: 1848 STONYBROOK DR.  
City-St-Zip: FORT PIERCE, FL 34945

Title: SD ( ) Delete  
Name: DUROCHER, GLORIA  
Address: 1684 CHRISTMAS COVE  
City-St-Zip: FORT PIERCE, FL 34945

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

Title: PD (X) Change ( ) Addition  
Name: ELLIOTT, BRUCE L  
Address: 1672 WALDEN POND DR  
City-St-Zip: FORT PIERCE, FL 34945

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

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

Title: ATD (X) Change ( ) Addition  
Name: LEVAN, KATHRYN  
Address: 1705 GOLDEN POND DRIVE  
City-St-Zip: FORT PIERCE, FL 34945

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

Title: SD (X) Change ( ) Addition  
Name: MCCALLISTER, BARBARA  
Address: 10108 MILL CREEK LN  
City-St-Zip: FORT PIERCE, FL 34945

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: DELLA M. DEARCOP

TD

03/10/2008

Electronic Signature of Signing Officer or Director

Date