

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000006019

FILED
Jan 14, 2010
Secretary of State

Entity Name: SAINT JOHNS COVE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2610 SIMS COVE LANE
JACKSONVILLE, FL 32223

New Principal Place of Business:

Current Mailing Address:

2610 SIMS COVE LANE
JACKSONVILLE, FL 32223

New Mailing Address:

FEI Number: 59-3398455

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAFSER, PATRICE G
2610 SIMS COVE LANE
JACKSONVILLE, FL 32223 US

Name and Address of New Registered Agent:

LAFSER, PATRICE G TREAS
2610 SIMS COVE LANE
JACKSONVILLE, FL 32223 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: PATRICE GAYLE LAFSER

01/14/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: SALEEBA, ANTHONY PRES
Address: 2634 SIMS COVE LANE
City-St-Zip: JACKSONVILLE, FL 32223

Title: SD
Name: CARROLL, TIMOTHY E SEC
Address: 11766 MANDARIN ROAD
City-St-Zip: JACKSONVILLE, FL 32223

Title: TD
Name: LAFSER, PATRICE G TREAS
Address: 2610 SIMS COVE LANE
City-St-Zip: JACKSONVILLE, FL 32223

I hereby 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 all other like empowered.

SIGNATURE: PATICE GAYLE LAFSER

TD

01/14/2010

Electronic Signature of Signing Officer or Director

Date