

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002909

FILED
Apr 03, 2009
Secretary of State

Entity Name: EMERALD COVE HOMEOWNERS ASSOCIATION OF APOPKA, INC.

Current Principal Place of Business:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779 US

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779 US

New Mailing Address:

FEI Number: 57-1169550 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HART, JR, JAMES W
SENTRY MANAGEMENT INC
2180 WEST SR 434 SUITE 5000
LONGWOOD, FL 32779 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: PD () Delete
Name: DOYLE, MATTHEW
Address: 2214 KINGSCREST CIR
City-St-Zip: APOPKA, FL 32712

Title: D () Delete
Name: FENTY, ANTHONY
Address: 2147 HAYFIELD WAY
City-St-Zip: APOPKA, FL 32712

Title: SD () Delete
Name: TOXEY, MITZI
Address: 2271 WINDSOR CREST LOOP
City-St-Zip: APOPKA, FL 32712

Title: TD () Delete
Name: BUGGS, TROD
Address: 1869 EMERALD COVE BLVD
City-St-Zip: APOPKA, FL 32712

Title: D () Delete
Name: SHUBA, KEN
Address: 2247 WINDSOR CREST LOOP
City-St-Zip: APOPKA, FL 32712

Title: D () Delete
Name: VILA, GEORGE
Address: 1875 EMERALD COVE BLVD
City-St-Zip: APOPKA, FL 32712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FEARS, SHARON
Address: 2054 HAYFIELD WAY
City-St-Zip: APOPKA, FL 32712

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

Title: VPD (X) Change () Addition
Name: BRACKIN, ANDREA L
Address: 2353 KINGSCREST CIR
City-St-Zip: APOPKA, FL 32712

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

Title: SD (X) Change () Addition
Name: STORY, GYASI
Address: 2042 HAYFIELD WAY
City-St-Zip: APOPKA, FL 32712

Title: D (X) Change () Addition
Name: VELEZ, HOMMY
Address: 2097 HAYFIELD WAY
City-St-Zip: APOPKA, FL 32712

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: SHARON FEARS

PD

04/03/2009

Electronic Signature of Signing Officer or Director

Date

NAME OF ENTITY:

EMERALD COVE HOMEOWNERS ASSOCIATION OF APOPKA, INC

DOCUMENT NUMBER:

N03000002909

ADDITIONAL BOARD MEMBERS:

DIRECTOR
TROY REASONER
2280 KINGSCREST CIR
APOPKA FL 32712