2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# N43525

Entity Name: BRADFORD COVE MASTER ASSOCIATION, INC.

Current Principal Place of Business:

225 S WESTMONTE DRIVE
ALTAMONTE SPRINGS, FL 32714 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 162147
ALTAMONTE SPRINGS, FL 327162147 US

New Mailing Address:

FEI Number: 59-2936261 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WOMACK, ELLEN R
225 S WESTMONTE DRIVE
SUITE 3310
ALTAMONTE SPRINGS, FL 32714 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: VPD ( ) Delete
Name: HOPKINS, MARY A
Address: 8050 WALDORF COURT
City-St-Zip: ORLANDO, FL 32817

Title: DST ( ) Delete
Name: SUNNERS, HELEN P
Address: 3709 PICKWICK DRIVE
City-St-Zip: ORLANDO, FL 32817

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: CRESPO, LUIS
Address: PO BOX 1482
City-St-Zip: GOLDENROD, FL 32733

Title: DV (X) Change ( ) Addition
Name: LUTMAN, EDUARDO
Address: PO BOX 1482
City-St-Zip: GOLDENROD, FL 32733

Title: DST ( ) Change (X) Addition
Name: LUCAS, CAROLYN
Address: 3823 WINGBOW CT
City-St-Zip: ORLANDO, FL 32817

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: LUIS CRESPO DP 04/28/2009

Electronic Signature of Signing Officer or Director — Date