

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710113

FILED  
Feb 15, 2009  
Secretary of State

Entity Name: SIGNAL COVE OWNERS, INC.

## Current Principal Place of Business:

13139 TILLER DRIVE  
HUDSON, FL 34667

## New Principal Place of Business:

## Current Mailing Address:

13139 TILLER DRIVE  
HUDSON, FL 34667

## New Mailing Address:

FEI Number: 59-1284973

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ERGLE, CAROL  
13115 COXSWAIN COURT  
HUDSON, FL 34667 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: S ( ) Delete  
Name: HILLER, CARRIE  
Address: 13013 BUOY CT  
City-St-Zip: HUDSON, FL 34667

Title: T ( ) Delete  
Name: ERGLE, CAROL  
Address: 13115 COXSWAIN CT  
City-St-Zip: HUDSON, FL 34667

Title: P ( ) Delete  
Name: BACKES, DOUGLAS  
Address: 13122 BUOY CT  
City-St-Zip: HUDSON, FL 34667

Title: AVP ( ) Delete  
Name: KELLEY, JIM  
Address: 6326 TOWER DRIVE  
City-St-Zip: HUDSON, FL 34667

Title: V ( ) Delete  
Name: ERGLE, DAVID  
Address: 13115 COXSWAIN CT  
City-St-Zip: HUDSON, FL 34667

Title: AT ( ) Delete  
Name: BACKES, PEGGY  
Address: 13122 BUOY CT  
City-St-Zip: HUDSON, FL 34667

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change ( ) Addition  
Name: CHAPMAN, MILDRED  
Address: 13116 CABIN COURT  
City-St-Zip: HUDSON, FL 34667

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

Title: P (X) Change ( ) Addition  
Name: DIECKMANN, JOHN  
Address: 13038 STARBOARD COURT  
City-St-Zip: HUDSON, FL 34667

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

Title: V (X) Change ( ) Addition  
Name: HOLCOMBE, JIM  
Address: 13105 CABIN COURT  
City-St-Zip: HUDSON, FL 34667

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: CAROL ERGLE

T

02/15/2009

Electronic Signature of Signing Officer or Director

Date