## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#718670**

FILED Mar 18, 2009 Secretary of State

Entity Name: ANGLER'S COVE CONDOMINIUM OF MARTIN COUNTY, INC.

**Current Principal Place of Business: New Principal Place of Business:** 1456 N.E. OCEAN BOULEVARD STUART, FL 34996 **Current Mailing Address: New Mailing Address:** 1456 N.E. OCEAN BOULEVARD STUART, FL 34996 FEI Number: 59-1394974 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PAPSIDERO, ROY 1456 N.E. OCEAN BLVD 15-101 STUART, FL 34996 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition CARPENTIER, ANTHONY Name: Name: 1456 NE OCEAN BLVD. 10-202 Address: Address: City-St-Zip: STUART, FL 34996 City-St-Zip: Title: SEC. ( ) Delete Title: TD (X) Change ( ) Addition DALY, JIM Name: DALY, JIM Name: Address: 1456 NE OCEAN BLVD. 2-203 Address: 1456 NE OCEAN BLVD. 2-203 City-St-Zip: STUART, FL 34996 City-St-Zip: STUART, FL 34996 Title: () Delete Title: SEC (X) Change ( ) Addition MARONEY, RALF MOORE, JAMES Name: Name: 1456 NE OCEAN BLVD. 1-101 1456 NE OCEAN BLVD. 9-202 Address: Address: City-St-Zip: STUART, FL 34996 City-St-Zip: STUART, FL 34996 Title: ASEC ( ) Delete Title: **ASEC** (X) Change ( ) Addition Name: MOORE, JAMES Name: GASSENHEIMER, JAMES 744 NE. JENSEN BEACH BLVD. Address: Address: 10905 SW 75TH COURT City-St-Zip: JENSEN BEACH, FL 34957 City-St-Zip: MIAMI, FL 33156 Title: PD () Delete Title: () Change () Addition PUZZO, PAUL Name: Name: 1456 NE OCEAN BLVD. 2-103 Address: Address: STUART, FL 34996 City-St-Zip: 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: PAUL PUZZO PD 03/18/2009