

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721768

FILED
Mar 19, 2009
Secretary of State

Entity Name: Y.C.C.S. PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

3883 S E FAIRWAY EAST
STUART, FL 34997

New Principal Place of Business:

Current Mailing Address:

3883 S E FAIRWAY EAST
STUART, FL 34997

New Mailing Address:

FEI Number: 26-3972576

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORNETT, JANE L ESQ
401 EAST OSCEOLA ST
STUART, FL 34994 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: STRACUZZI, CHARLES
Address: 3201 SE COURT DRIVE
City-St-Zip: STUART, FL 34997

Title: TD () Delete
Name: SMITH, RAYMOND K
Address: 3291 SE FAIRWAY WEST
City-St-Zip: STUART, FL 34997

Title: SD () Delete
Name: STARKEL, JOHN
Address: 3002 SE FAIRWAY W
City-St-Zip: STUART, FL 34997

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: CHARLES STRACUZZI

PD

03/19/2009

Electronic Signature of Signing Officer or Director

Date