

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724883

FILED
May 30, 2008
Secretary of State

Entity Name: COLONY COVE CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

3743 COLONY COVE TRAIL
JACKSONVILLE, FL 32277 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 11405
JACKSONVILLE, FL 32277 US

New Mailing Address:

FEI Number: 23-7229243 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BOBEK, BARRY
503 E MONROE ST
JACKSONVILLE, FL 32202 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: CLARK, MARY ANN
Address: 3826 MUSKET TRAIL
City-St-Zip: JACKSONVILLE, FL 32277

Title: VD () Delete
Name: RADLOFF, ED
Address: 3768 BUCKSKIN TRAIL WEST
City-St-Zip: JACKSONVILLE, FL 32277

Title: SD () Delete
Name: DUBS, LINDA
Address: 3844 BUCKSKIN TRAIL E
City-St-Zip: JACKSONVILLE, FL 32277

Title: TD () Delete
Name: GEORGES, TRENT
Address: 3743 COLONY COVE TRAIL
City-St-Zip: JACKSONVILLE, FL 32277

Title: SD () Delete
Name: UNDHEIM, DAN
Address: 7438 BUCKSKIN TRAIL S
City-St-Zip: JACKSONVILLE, FL 32277

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:

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: TRENT GEORGES

TD

05/30/2008

Electronic Signature of Signing Officer or Director

Date