

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727185

FILED
Mar 05, 2009
Secretary of State

Entity Name: POPPLETON CREEK CONDOMINIUM ASSOCIATION INC

Current Principal Place of Business:

950 COLORADO AVE
CLUB HOUSE #2
STUART, FL 34994

New Principal Place of Business:

Current Mailing Address:

950 SO KANNER HWY
CLUBHOUSE #2
STUART, FL 34994

New Mailing Address:

FEI Number: 59-1489743 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSS, DEBORAH ESQ
759 S FEDERAL HWY
STE 212
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: STANISLAW, JACQUELINE
Address: 950 S KANNER HWY A-22
City-St-Zip: STUART, FL 34994

Title: VPD () Delete
Name: SANBORN, GENE
Address: 950 S KANNER HWY G 803
City-St-Zip: STUART, FL 34994

Title: TD () Delete
Name: LAYSON, CAROL
Address: 950 S KANNER HWY TH-8
City-St-Zip: STUART, FL 34994

Title: D () Delete
Name: CREED, DURWOOD
Address: 950 S KANNER HWY G 605
City-St-Zip: STUART, FL 34994

Title: D () Delete
Name: JENSEN, SYLVIA
Address: 950 S KANNER HWY G306
City-St-Zip: STUART, FL 34994

Title: D () Delete
Name: EDWARDS, KIP
Address: 950 S. KANNER WAY G-603
City-St-Zip: STUART, FL 34994

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: STANISLAW, JACQUELINE
Address: 950 S KANNER HWY A-22
City-St-Zip: STUART, FL 34994

Title: D (X) Change () Addition
Name: SANBORN, GENE
Address: 950 S KANNER HWY G 803
City-St-Zip: STUART, FL 34994

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

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

Title: VPD (X) Change () Addition
Name: JENSEN, SYLVIA
Address: 950 S KANNER HWY G306
City-St-Zip: STUART, FL 34994

Title: PD (X) Change () Addition
Name: EDWARDS, KIP
Address: 950 S. KANNER WAY G-603
City-St-Zip: STUART, FL 34994

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 LAYSON

TD

03/05/2009

Electronic Signature of Signing Officer or Director

_____ Date