

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727696

FILED
Jan 31, 2009
Secretary of State

Entity Name: PORT LARGO RESIDENTIAL PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

148 BAHAMA AVENUE
KEY LARGO, FL 33037 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 979
KEY LARGO, FL 330370979 US

New Mailing Address:

FEI Number: 23-7363383

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARRIGAN, BILL
148 BAHAMA AVENUE
KEY LARGO, FL 33037 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: P () Delete
Name: HARRIGAN, BILL
Address: 148 BAHAMA AVE
City-St-Zip: KEY LARGO, FL 33037

Title: D () Delete
Name: SMITH, TERRY
Address: 76 MARINA AVENUE
City-St-Zip: KEY LARGO, FL 33037

Title: T () Delete
Name: HILLS, NETTA
Address: PO BOX 979
City-St-Zip: KEY LARGO, FL 330370979

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: BILL HARRIGAN

PRES

01/31/2009

Electronic Signature of Signing Officer or Director

Date