

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729039

FILED
Mar 10, 2009
Secretary of State

Entity Name: CLUB HOUSE COVE ASSOCIATION, INC.

Current Principal Place of Business:

11606 NW 19 DRIVE
CORAL SPRINGS, FL 33071 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 770850
CORAL SPRINGS, FL 33077 US

New Mailing Address:

FEI Number: 59-1610006

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROCK, JANE
11606 NW 19 DRIVE
CORAL SPRINGS, FL 33071 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: VP () Delete
Name: HORKHEIMER, MARGIE
Address: 3532 NE 3RD AVE.
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: D () Delete
Name: LOPEZ, MARIA
Address: 1100 CRYSTAL LAKE DR., #108
City-St-Zip: POMPANO BEACH, FL 33064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HORKHEIMER, MARGIE
Address: 3532 NE 3RD AVE.
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: S (X) Change () Addition
Name: LOPEZ, MARIA
Address: 1100 CRYSTAL LAKE DR., #108
City-St-Zip: POMPANO BEACH, FL 33064

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: MARGIE HORKHEIMER

P

03/10/2009

Electronic Signature of Signing Officer or Director

Date