2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731577

FILED Apr 01, 2009 Secretary of State

Entity Name: IMPERIAL COVE CONDOMINIUM IX ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

19029 US HWY 19N 19029 US 19 NORTH

CLUBHOUSE CLUBHOUSE

CLEARWATER, FL 33764 US CLEARWATER, FL 33764 US

Current Mailing Address: New Mailing Address:

19029 US HWY 19N 19029 US 19 NORTH

CLUBHOUSE CLUBHOUSE

CLEARWATER, FL 33764 US CLEARWATER, FL 33764 US

FEI Number: 90-0038877 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FLORIDA COMM. PROPERTY MANAGEMENT FLORIDA COMMUNITY PROPERTY MANAGEMENT

8141 54TH AVE NO 8141 54TH AVE NORTH

SAINT PETERSBURG, FL 33709 US SAINT PETERSBURG, FL 33709 US

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: ROBERT KRESNIK 04/01/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD () Delete Title: V (X) Change() Addition

 Name:
 FRANKLIN, JOEL
 Name:
 FRANKLIN, JOEL

 Address:
 19029 US HWY 19N 9-207
 Address:
 19029 US 19 N 9-207

 City-St-Zip:
 CLEARWATER, FL 33764
 City-St-Zip:
 CLEARWATER, FL 33764

Title: SD () Delete Title: S (X) Change () Addition

 Name:
 MCCARTHY, PAULINE
 Name:
 FINNEY, LARRY

 Address:
 19029 US HWY 19N 9-201
 Address:
 19029 US 19 N 9-501

 City-St-Zip:
 CLEARWATER, FL 33764
 City-St-Zip:
 CLEARWATER, FL 33764

 $\label{eq:title:power} \mbox{Title:} \qquad \mbox{VD} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{P} \qquad \mbox{(X) Change () Addition}$

 Name:
 MARRA, PETER
 Name:
 MARRA, PETER

 Address:
 19029 US HWY 19N 9-406
 Address:
 19029 US 19 N 9-406

 City-St-Zip:
 CLEARWATER, FL 33764
 City-St-Zip:
 CLEARWATER, FL 33764

 Name:
 GRILLO, PETER
 Name:
 GRILLO, PETER

 Address:
 19029 YS 190N 9-504
 Address:
 19029 US 19 N 9-504

 City-St-Zip:
 CLEARWATER, FL 33764
 City-St-Zip:
 CLEARWATER, FL 33764

Name: Name: ZIAN, BEN

 Address:
 Address:
 19029 US 19 N 9-509

 City-St-Zip:
 City-St-Zip:
 CLEARWATER, FL 33764

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: PETE MARRA MR 04/01/2009