2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2009
Secretary of State

DOCUMENT# 733674

Entity Name: INTERCOASTAL COVE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

300 NE SPANISH RIVER BLVD
SUITE 18
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

500 N E SPANISH RIVER BLVD
SUITE #18
BOCA RATON, FL 33431 US

New Mailing Address:

FEI Number: 59-0908380 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIS, ERNEST
BEACON PROPERTY MGMT
500 NE SPANISH RIVER BLVD, SUITE #18
BOCA RATON, FL 33431 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: HARRINGTON, KEVIN
Address: 1708 S OCEAN BLVD, SUITE #1
City-St-Zip: DELRAY BEACH, FL 33483

Title: VD ( ) Delete
Name: LUKE, JOHN A
Address: PO BOX 941556
City-St-Zip: MAITLAND, FL 32794

Title: TD ( ) Delete
Name: PRINGLE, KATHRYN
Address: 1708 S OCEAN BLVD, SUITE #4
City-St-Zip: DELRAY BEACH, FL 33483

Title: SD ( ) Delete
Name: BURTON, CHRISTOPHER
Address: 3520 PALAIS TERRACE
City-St-Zip: LAKE WORTH, FL 33467

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:

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: KEVIN HARRINGTON PD 03/24/2009

Electronic Signature of Signing Officer or Director — Date