

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748666

FILED
Mar 21, 2009
Secretary of State

Entity Name: MIDNIGHT COVE II ASSOCIATION, INC.

Current Principal Place of Business:

6327 MIDNIGHT PASS ROAD
SARASOTA, FL 342422403

New Principal Place of Business:

Current Mailing Address:

6327 MIDNIGHT PASS ROAD
SARASOTA, FL 342422403

New Mailing Address:

FEI Number: 75-1694325

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOBECK, DANIEL
2033 MAIN STREET
STE 403
SARASOTA, FL 34237 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: MORRISON, CARL
Address: 160 COVE II PLACE, # 422
City-St-Zip: SARASOTA, FL 34242

Title: VD (X) Delete
Name: DONOVAN, FRANK
Address: 1300 COVE II PLACE #712
City-St-Zip: SARASOTA, FL 34242

Title: TD () Delete
Name: JANSEN, JAMES
Address: 1900 COVE II PLACE #136
City-St-Zip: SARASOTA, FL 34242

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DONOVAN, FRANK
Address: 1300 COVE II PLACE, # 712
City-St-Zip: SARASOTA, FL 34242

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

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

Title: G M () Change (X) Addition
Name: BRAND, KENNETH W ASST.SE
Address: 2930 SUNNYSIDE ST
City-St-Zip: SARASOTA, FL 34239

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: KENNETH W BRAND

GMR

03/21/2009

Electronic Signature of Signing Officer or Director

Date