## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 749058** 

FILED Feb 24, 2009 Secretary of State

Entity Name: KITCHING COVE ESTATES HOMEOWNERS ASSOCIATION, INC.

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

1010 SE KITCHING COVE 1010 SE KITCHING COVE LN PORT ST LUCIE, FL 34952 PORT ST LUCIE, FL 34952 US

**Current Mailing Address: New Mailing Address:** 

1010 SE KITCHING COVE LN PORT ST LUCIE, FL 34952 US

FEI Number: 59-2404423 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

HICKEY, LORRAINE HICKEY, LORRAINE 1010 SE KITCHING COVE 1010 SE KITCHING COVE LN US PORT ST LUCIE, FL 34952 PORT ST LUCIE, FL 34952

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: LORRAINE HICKEY 02/24/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition HICKEY, THOMAS HICKEY, THOMAS M Name: Name: 1010 SE KITCHING COVE Address: 1010 SE KITCHING COVE LN Address: City-St-Zip: PORT SAINT LUCIE, FL 34952 City-St-Zip: PORT SAINT LUCIE, FL 34952

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

KING, JOLEEN Name: KING, JOLEEN Name:

Address: 1016 SE KITCHINH COVE W Address: 1016 SE KITCHINH COVE LN City-St-Zip: PSL, FL 34952

PSL, FL 34952 City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition STRANIGAN, HEATHER STRANIGAN, HEATHER Name: Name: 1002 SE KITCHING COVE 1002 SE KITCHING COVE LN Address: Address: City-St-Zip: PORT SAINT LUCIE, FL 34952 City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: () Delete Title: (X) Change ( ) Addition Name: HICKEY, LORRAINE Name: HICKEY, LORRAINE

1010 SE KITCHING COVE 1010 SE KITCHING COVE LN Address: Address: City-St-Zip: PORT SAINT LUCIE, FL 34952 City-St-Zip: PORT SAINT LUCIE, FL 34952

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

DILLON, JIM DILLON, JIM Name: Name:

1005 SE KITCHING COVE 1005 SE KITCHING COVE LN Address: Address: PORT SAINT LUCIE, FL 34952 City-St-Zip: PORT SAINT LUCIE, FL 34952 City-St-Zip:

Title: ( ) Delete Title: (X) Change ( ) Addition WESTMORELAND, JOE STRANIGAN, CRAIG B Name: Name:

Address: 1011 SE KITCHING COVE LN Address: 1002 SE KITCHING COVE LN PORT ST. LUCIE, FL 34952 PORT ST. LUCIE, FL 34952 City-St-Zip: 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: THOMAS M HICKEY Ρ 02/24/2009