

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749417

FILED
Apr 23, 2008
Secretary of State

Entity Name: FISHERMANS COVE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

8009 S ORANGE AVENUE
ORLANDO, FL 32809 US

New Principal Place of Business:

5955 T.G. LEE BLVD
STE 30
ORLANDO, FL 328224457 US

Current Mailing Address:

5955 T.G. LEE BLVD, SUITE 300
ORLANDO, FL 328224457

New Mailing Address:

FEI Number: 59-2009394

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LELAND MANAGEMENT
8009 S ORANGE AVENUE
ORLANDO, FL 32809 US

Name and Address of New Registered Agent:

LELAND MANAGEMENT
5955 T.G. LEE BLVD
STE 300
ORLANDO, FL 328224457 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:

04/23/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: FRASER, JENNY
Address: 51 FISHERMANS COVE ROAD
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D () Delete
Name: SNYDER, BERNARD
Address: 79 FISHERMANS COVE ROAD
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D () Delete
Name: ARCHER, ED
Address: 19 FISHERMANS COVE ROAD
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D () Delete
Name: JAMES, ED
Address: 209 SEA ISLAND DRIVE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D () Delete
Name: KENNEDY, JOAN
Address: 6 FISHERMANS COVE ROAD
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D () Delete
Name: MATHEWSON, LAURA
Address: 21 FISHERMANS COVE ROAD
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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:

Title: BP (X) Change () Addition
Name: OURUSOFF, SERGEI
Address: 39 FISHERMANS COVE ROAD
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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: JENNY FRASER

VPD

04/23/2008

Electronic Signature of Signing Officer or Director

Date