

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752539

FILED
Feb 19, 2009
Secretary of State

Entity Name: SKIFF HARBOUR TOWNHOMES ASSOCIATION, INC.

Current Principal Place of Business:

2189 CLEVELAND ST
STE 225
CLEARWATER, FL 33765

New Principal Place of Business:

Current Mailing Address:

2189 CLEVELAND ST
STE 225
CLEARWATER, FL 33765

New Mailing Address:

FEI Number: 59-2175122

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEIGHTON, LENNARD
2189 CLEVELAND ST
STE 225
CLEARWATER, FL 33765 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: WILLIAM, JOHNSON
Address: 224 SKIFF POINT
City-St-Zip: CLEARWATER BEACH, FL 33767

Title: VD () Delete
Name: SPILLANE, CORNELIUS
Address: 222 SKIFF POINT
City-St-Zip: CLEARWATER, FL 33765

Title: VPTD () Delete
Name: PIBER, GUSTI
Address: 220 SKIFF POINT
City-St-Zip: CLEARWATER BEACH, FL 33767

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change () Addition
Name: SPILLANE, CORNELIUS
Address: 222 SKIFF POINT
City-St-Zip: CLEARWATER, FL 33765

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: WILLIAM JOHNSON

PD

02/19/2009

Electronic Signature of Signing Officer or Director

Date