# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 30, 2009**
**Secretary of State**

DOCUMENT# 753193

**Entity Name:** LOBLOLLY BAY PROPERTY OWNERS' ASSOCIATION, INCORPORATED

**Current Principal Place of Business:**

7407 SE HILL TERRACE
HOBE SOUND, FL 33455

**New Principal Place of Business:**

**Current Mailing Address:**

7407 SE HILL TERRACE
HOBE SOUND, FL 33455

**New Mailing Address:**

**FEI Number: 59-2069808** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

CORNETT, JANE
401 E. OSCEOLA ST
STUART, FL 34994 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: VP ( ) Delete
Name: SHARP, M. RUST
Address: 7771 SE LITTLE HARBOUR DR.
City-St-Zip: HOBE SOUND, FL 33455

Title: P ( ) Delete
Name: JONES, JOHN
Address: 1751 SE LOBLOLLY BAY DR
City-St-Zip: HOBE SOUND, FL 33455

Title: D ( ) Delete
Name: WENTZ, BARBRA
Address: 78911 SE LITTLE HARBOUR DR
City-St-Zip: HOBE SOUND, FL 33455

Title: T ( ) Delete
Name: PUTH, JOHN
Address: 7763 SE LOBLOLLY BAY DR
City-St-Zip: HOBE SOUND, FL 33455

Title: D ( ) Delete
Name: BELL, ELEANOR
Address: 7950 SE DOCK STREET 35
City-St-Zip: HOBE SOUND, FL 33455

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VP (X) Change ( ) Addition
Name: PUTH, JOHN W
Address: 7763 SE LOBLOLLY BAY DR.
City-St-Zip: HOBE SOUND, FL 33455

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

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

Title: T (X) Change ( ) Addition
Name: HAMMER, FREDERICK S
Address: 7763 SE LOBLOLLY BAY DR
City-St-Zip: HOBE SOUND, FL 33455

Title: D (X) Change ( ) Addition
Name: LESTER, SUE
Address: 7770 SE LITTLE HARBOUR DR.
City-St-Zip: HOBE SOUND, FL 33455

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: JOHN JONES P 03/30/2009

Electronic Signature of Signing Officer or Director — Date