

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762473

FILED
Apr 20, 2009
Secretary of State

Entity Name: DEEP WATER COVE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

908 GARDENGATE CIRCLE
PENSACOLA, FL 32504 US

New Principal Place of Business:

Current Mailing Address:

908 GARDENGATE CIRCLE
PENSACOLA, FL 32504 US

New Mailing Address:

FEI Number: 36-3189072

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ETHERIDGE, RAY O.
908 GARDENGATE CIRCLE
PENSACOLA, FL 32504 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: D () Delete
Name: SCHUSTER, PAUL
Address: 100 FT PICKENS RD # 102
City-St-Zip: PENSACOLA BEACH, FL 32561

Title: D () Delete
Name: BUDZOWSKI, DAVID
Address: 110 MATAMORUS DR
City-St-Zip: PENSACOLA BEACH, FL 32561

Title: TD () Delete
Name: PARTAIN, MARGO
Address: 100 FT PICKENS RD # 101
City-St-Zip: PENSACOLA BCH, FL 32561

Title: D () Delete
Name: REED, RACHEL
Address: 100 FT PICKERS RD #104
City-St-Zip: PENSACOLA, FL 32561

Title: D (X) Delete
Name: YATES, HELEN
Address: 3820 SABER TOOTH CIR.
City-St-Zip: GULF BREEZE, FL 32563

Title: VD (X) Delete
Name: KNOWLES, HALLIE
Address: 3156 SONJA AVENUE
City-St-Zip: MILTON, FL 32571

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WIGGINGTON, HAZEL
Address: 110 MATAMORUS DRIVE
City-St-Zip: PENSACOLA BEACH, FL 32561

Title: STD (X) Change () Addition
Name: PARTAIN, MARGO
Address: 100 FT. PICKENS ROAD #101
City-St-Zip: PENSACOLA BEACH, FL 32561

Title: D (X) Change () Addition
Name: YATES, HELEN
Address: 3820 SABERTOOTH CIRCLE
City-St-Zip: GULF BREEZE, FL 32563

Title: D (X) Change () Addition
Name: SCHUSTER, PAUL
Address: 100 FT. PICKENS ROAD #102
City-St-Zip: PENSACOLA, FL 32561

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

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: RAY O. ETHERIDGE

RA

04/20/2009

Electronic Signature of Signing Officer or Director

Date