

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002107

FILED
Mar 24, 2009
Secretary of State

Entity Name: SUNSET COVE OF TREASURE ISLAND HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

8573 SUNSET CT.
TREASURE ISLAND, FL 33706

New Principal Place of Business:

Current Mailing Address:

LAMONT MANAGEMENT
250 104TH AVE
TREASURE ISLAND, FL 33706

New Mailing Address:

FEI Number: 59-3639585

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HILL, LEONARD
LAMONT MANAGEMENT
250 104TH AV.
SAINT PETERSBURG, FL 33706 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: ST () Delete
Name: LUDY, MARK
Address: 8575 EAST BAY DRIVE
City-St-Zip: TREASURE ISLAND, FL 33706

Title: VP () Delete
Name: LOWE, JOHN
Address: 8575 SUNSET COURT
City-St-Zip: SAINT PETERSBURG, FL 33706

Title: P () Delete
Name: LETIZIO, LISA
Address: 3006 B W JULIA STREET
City-St-Zip: TAMPA, FL 33629

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:

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: LISA LETIZIO

P

03/24/2009

Electronic Signature of Signing Officer or Director

Date