# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 24, 2009**
**Secretary of State**

DOCUMENT# N02000006316

**Entity Name:** IBIS COVE OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

920 THIRD ST STE B
NEPTUNE BCH, FL 32266

**New Principal Place of Business:**

**Current Mailing Address:**

920 THIRD ST STE B
NEPTUNE BCH, FL 32266

**New Mailing Address:**

**FEI Number: 13-4219397** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

WALLACE, L. DENISE
920 THIRD ST STE B
NEPTUNE BCH, FL 32266 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: EUBANKS, CHARLES W JR
Address: 1267 SAILFISH LANE
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: VD ( ) Delete
Name: WEST, KENNETH E JR
Address: 7118 TARPON COURT
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: TSD ( ) Delete
Name: HITTENBERGER, JEFF
Address: 7129 TARPON COURT
City-St-Zip: GREEN COVE SPRINGS, FL 32043

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

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

Title: VD (X) Change ( ) Addition
Name: PETERSON, DORIS
Address: PO BOX 8807
City-St-Zip: FLEMING ISLAND, FL 32006

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: L. DENISE WALLACE RA 03/24/2009

Electronic Signature of Signing Officer or Director — Date