

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009623

FILED  
Feb 19, 2010  
Secretary of State

**Entity Name:** CORNICHE TOWNHOMES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

2180 W. ST RD. 434  
SUITE 5000  
LONGWOOD, FL 327795044

**New Principal Place of Business:**

2180 WEST SR 434  
SUITE 5000  
LONGWOOD, FL 327795044

**Current Mailing Address:**

2180 W. ST RD. 434  
SUITE 5000  
LONGWOOD, FL 327795044

**New Mailing Address:**

2180 WEST SR 434  
SUITE 5000  
LONGWOOD, FL 327795044

**FEI Number:** 42-1575752

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HART, JAMES W JR  
SENTRY MANAGEMENT INC  
2180 W SR 434 SUITE 5000  
LONGWOOD, FL 32779 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  
Name: BENSON, KEVIN  
Address: 159 STERLING SPRINGS LN  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: TD  
Name: SHARIFI, NEGAR  
Address: 150 MAITLAND AVE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: SD  
Name: CARLSON, LISA  
Address: 265 STERLING SPRINGS LN  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: D  
Name: HIGHTOWER, BILLY  
Address: 243 STERLING SPRINGS LN  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

I hereby 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 all other like empowered.

SIGNATURE: KEVIN BENSON

PD

02/19/2010

Electronic Signature of Signing Officer or Director

Date