2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# N03000009341

Entity Name: COCONUT GROVE DOCK ASSOCIATION, INC.

Current Principal Place of Business:

144 USEPPA ISLAND
CAPTIVA, FL 33924

New Principal Place of Business:

Current Mailing Address:

C/O JACK O. HACKETT, II
99 NESBIT STREET
PUNTA GORDA, FL 33950

New Mailing Address:

FEI Number: 20-5116439 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HACKETT, JACK O II
FARR LAW FIRM
99 NESBIT STREET
PUNTA GORDA, FL 33950 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:	SALAS, JOSELITO C	
Address:	4 N. 625 MAGNOLIA LANE	
City-St-Zip:	WAYNE, IL 60184	
Title:	VPD	( ) Delete
Name:	SHOOK, CHARLES	
Address:	3333 W. RIVERSIDE DRIVE	
City-St-Zip:	FORT MYERS, FL 33901	
Title:	SD	( ) Delete
Name:	HUGHES, JAMES J	
Address:	705 10TH STREET, S. UNIT 106	
City-St-Zip:	NAPLES, FL 34102	
Title:	D	( ) Delete
Name:	SABELHAUSE, ROBERT	
Address:	144 USEPPA ISLAND	
City-St-Zip:	CAPTIVA, FL 33924	
Title:	D	( ) Delete
Name:	LAWLER, MICHAEL D	
Address:	4001 N. TAMIAMI TRAIL, SUITE 102	
City-St-Zip:	NAPLES, FL 34103	
Title:	D	( ) Delete
Name:	PAGE, STEPHEN C	
Address:	1000 S.E. MONTERAY COMMONS BLVD.,SUITE 306	
City-St-Zip:	STUART, FL 34996	

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:	
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: JOSELITO C. SALAS P 04/28/2009
Electronic Signature of Signing Officer or Director — Date