

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009828

FILED
Apr 19, 2009
Secretary of State

Entity Name: NORTHWEST CAPE CORAL NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

1220 NW 43RD AVE
CAPE CORAL, FL 33993

New Principal Place of Business:

3302 SW 7TH LANE
CAPE CORAL, FL 33991

Current Mailing Address:

P.O.BOX 442
CAPE CORAL, FL 33993

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SCOTT, DAVID C
1220 NW 43RD AVE
CAPE CORAL, FL 33993 US

Name and Address of New Registered Agent:

BURHOE, SUSAN
3302 SW 7TH LANE
CAPE CORAL, FL 33991 US

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: SUSAN BURHOE

04/19/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WILLIAMS, RICHARD
Address: 1013 OLD BURNT STORE RD N
City-St-Zip: CAPE CORAL, FL 33993

Title: VP () Delete
Name: BURHOE, SUSAN
Address: 3302 SW 7TH LN
City-St-Zip: CAPE CORAL, FL 33991

Title: T () Delete
Name: ELLINGTON, ROBYN
Address: 1213 NW 37TH PL
City-St-Zip: CAPE CORAL, FL 33993

Title: S () Delete
Name: HAAS, RICHARD
Address: 416 NW 36TH AVE
City-St-Zip: CAPE CORAL, FL 33993

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BURHOE, SUSAN
Address: 3302 SW 7TH LANE
City-St-Zip: CAPE CORAL, FL 33991

Title: VP (X) Change () Addition
Name: PETERS, STELLA
Address: 3615 NW 3RD TER
City-St-Zip: CAPE CORAL, FL 33993

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

Title: S (X) Change () Addition
Name: EYBS, CATHY
Address: 511 NW 36TH PLACE
City-St-Zip: CAPE CORAL, FL 33993

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: ROBYN ELLINGTON

T

04/19/2009

Electronic Signature of Signing Officer or Director

Date