2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2010
Secretary of State

DOCUMENT# N03585

Entity Name: COUNTRY CLUB COVE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4905 SE HANSON CIRCLE
STUART, FL 34997 US

New Principal Place of Business:

Current Mailing Address:

4905 SE HANSON CIRCLE
STUART, FL 34997 US

New Mailing Address:

FEI Number: 59-2766088 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORNETT, JANE L.
401 E. OSCEOLA ST.
STUART, FL 34994 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: GORDON, MARION F PD
Address: 5129 SE HANSON CIRCLE
City-St-Zip: STUART, FL 34997

Title: VD
Name: SCHROEDER, FRAN VD
Address: 5030 SE HANSON CIR.
City-St-Zip: STUART, FL 34997

Title: S
Name: GROAT, LINDA S
Address: 4799 SE HANSON CIRCLE
City-St-Zip: STUART, FL 34997

Title: D
Name: SLOAN, AL D
Address: 4960 SE HANSON CI.
City-St-Zip: STUART, FL 34997

Title: T
Name: GORDON, MARION T
Address: 5129 SE HANSON CIRCLE
City-St-Zip: STUART, FL 34997

Title: D
Name: LARSEN, WILLIAM D
Address: 5140 SE HANSON CIR.
City-St-Zip: STUART, FL 34997

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: MARION F. GORDON PD 02/12/2010

Electronic Signature of Signing Officer or Director Date