

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004511

FILED
Jan 07, 2009
Secretary of State

Entity Name: COQUINA CROSSING HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4905 LOS ALTOS CR
ELKTON, FL 32033 US

New Principal Place of Business:

5524 LASERENIDAD LN.
ELKTON, FL 32033 US

Current Mailing Address:

4905 LOS ALTOS CR
ELKTON, FL 32033 US

New Mailing Address:

P.O. BOX 42
ELKTON, FL 32033 US

FEI Number: 20-2202053

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOREEN, W RICHARD
800 MAITLAND AVE
ALTAMONTE SPRINGS, FL 32701 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: SD () Delete
Name: HAMMER, JEAN
Address: 4553 COQUINA CROSSING DRIVE
City-St-Zip: ELKTON, FL 32033

Title: TD () Delete
Name: ROTHFELD, MICHAEL
Address: 4905 LOS ALTOS CIRCLE
City-St-Zip: ELKTON, FL 32033

Title: D () Delete
Name: NAPPER, WILLIAM
Address: 4936 LOS ALTOS CIRCLE
City-St-Zip: ELKTON, FL 32033

Title: D () Delete
Name: HAASE, ARTHUR
Address: 5401 DE LEON LN
City-St-Zip: ELKTON, FL 32033

Title: PD () Delete
Name: LARSON, THOMAS
Address: 5308 CORONA WAY
City-St-Zip: ELKTON, FL 32033

Title: VPD () Delete
Name: TIMMERMAN, WALTER
Address: 5113 LA STRADA PL
City-St-Zip: ELKTON, FL 32033

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GREEN, THOMAS
Address: 4786 COQUINA CROSSING DRIVE
City-St-Zip: ELKTON, FL 32033

Title: VPD (X) Change () Addition
Name: NAPPER, WILLIAM
Address: 4936 LOS ALTOS CIRCLE
City-St-Zip: ELKTON, FL 32033

Title: SD (X) Change () Addition
Name: SABATINI, DONALD
Address: 4967 COQUINA CROSSING DR.
City-St-Zip: ELKTON, FL 32033

Title: TD (X) Change () Addition
Name: FRANK, ROBERT
Address: 5524 LASERENIDAD LN.
City-St-Zip: ELKTON, FL 32033

Title: D (X) Change () Addition
Name: LARSON, THOMAS
Address: 5308 CORONA WAY
City-St-Zip: ELKTON, FL 32033

Title: D (X) Change () Addition
Name: STONER, CHARLES
Address: 5116 AMERICO LN.
City-St-Zip: ELKTON, FL 32033

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: ROBERT FRANK

TD

01/07/2009

Electronic Signature of Signing Officer or Director

Date