2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008444

FILED Jan 1<u>2, 200</u>9 Secretary of State

Entity Name: THE TOWNHOMES AT LIGHTHOUSE COVE IV CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business: C/O HH MANAGEMENT SERVICES

C/O ARGUS PROPERTY MANAGEMENT 2477 STICKNEY POINT RD 118A

8007 34TH AVNUE EAST BRADENTON, FL 34211

SARASOTA, FL 34231

Current Mailing Address:

New Mailing Address:

C/O ARGUS PROPERTY MANAGEMENT 2477 STICKNEY POINT RD 118A

C/O HH MANAGEMENT SERVICES 8007 34TH AVNUE EAST BRADENTON, FL 34211

SARASOTA, FL 34231

Certificate of Status Desired ()

FEI Number: 20-4884965

FEI Number Applied For () FEI Number Not Applicable ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ARGUS PROPERTY MANAGEMENT 2477 STICKNEY POINT RD 118A SARASOTA, FL 34231

HH MANAGEMENT SERVICES 8007 34TH AVENUE EAST BRADENTON,, FL 34211 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: ROBYN FISCHER

01/12/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

VPD () Delete LABRECQUE, FRANK Name: Address:

226 CAPE HARBOUR LP #102

City-St-Zip: BRADENTON, FL 34240

Title: PD () Delete

DALE, BARBARA Name:

Address: 226 CAPE HAROUR LOOP STE 106

City-St-Zip: SARASOTA, FL 34240

Title: VPD () Delete HUGHES, JEFF Name:

335 CAPE HARBOUR LOOP STE 105 Address:

City-St-Zip: BRADENTON, FL 34212 (X) Change () Addition

LABRECQUE, FRANK Name:

Address: 226 CAPE HARBOUR LOOP #102

City-St-Zip: BRADENTON, FL 24212

(X) Change () Addition Title:

Name: HUGHES, CAROLYM

Address: 233 CAPE HARBOUR LOOP #104

City-St-Zip: BRADENTON, FL 34212

Title: (X) Change () Addition

Name: HUGHES, JEFF

335 CAPE HARBOUR LOOP STE 105 Address:

City-St-Zip: BRADENTON, FL 34212

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 FISCHER RΑ 01/12/2009