## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000000089

FILED Mar 23, 2009 Secretary of State

Entity Name: THE COTTAGES AT GREENLAND CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:	New Principal Place of Business:

11555 CENTRAL PARKWAY 6620 SOUTHPOINT DRIVE SOUTH SUITE 603 SUITE 610

JACKSONVILLE, FL 32224 JACKSONVILLE, FL 32224

New Mailing Address: **Current Mailing Address:** 

11555 CENTRAL PARKWAY 6620 SOUTHPOINT DRIVE SOUTH

SUITE 603 SUITE 610

JACKSONVILLE, FL 32224 JACKSONVILLE, FL 32224

FEI Number: 26-0823375 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DEFURIO, JAMES R P.A. DEFURIO, JAMES R P.A. 201 . KENNEDY BLVD. 201 KENNEDY BLVD. **SUITE 1460** SUITE 1460 TAMPA, FL 33602 US TAMPA, FL 33602 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: 03/23/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete () Change () Addition

DAVIS, CYNTHIA Name: Name: 5663 GREENLAND RD. #705 Address: Address: City-St-Zip: JACKSONVILLE, FL 32258 City-St-Zip:

Title: VSTD () Delete Title: VD (X) Change ( ) Addition

Name: BERNSTEIN, BRUCE Name: BLEDSOE, QUINN

Address: 5663 GREENLAND RD. #1605 Address: 5663 GREENLAND RD. #701 City-St-Zip: JACKSONVILLE, FL 32258 City-St-Zip: JACKSONVILLE, FL 32258

Title: VD () Delete Title: (X) Change ( ) Addition

JOHNSON, SUSAN Name: OWENS, SELETA Name: 5663 GREENLAND RD. #404 5663 GREENLAND RD. #1902 Address: Address: City-St-Zip: JACKSONVILLE, FL 32258 City-St-Zip: JACKSONVILLE, FL 32258

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: CYNTHIA DAVIS PD 03/23/2009