

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003907

FILED
Apr 14, 2009
Secretary of State

Entity Name: JUDD CREEK PRESERVE COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

5789 CAPE HARBOUR DR., STE. 201
CAPE CORAL, FL 33914

New Principal Place of Business:

Current Mailing Address:

5789 CAPE HARBOUR DR., STE. 201
CAPE CORAL, FL 33914

New Mailing Address:

FEI Number: 26-2349424

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOLANOS TRUXTON, P.A.
12800 UNIVERSITY DR., STE. 350
FT. MYERS, FL 33907 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: DP () Delete
Name: DEARDEN, CRAIG A.
Address: 5789 CAPE HARBOUR DR., STE. 201
City-St-Zip: CAPE CORAL, FL 33914

Title: DV () Delete
Name: KIRKMAN, JANE
Address: 5789 CAPE HARBOUR DR., STE. 201
City-St-Zip: CAPE CORAL, FL 33914

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: DEARDEN, CRAIG A
Address: 5789 CAPE HARBOUR DR., STE. 201
City-St-Zip: CAPE CORAL, FL 33914

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

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: CRAIG A. DEARDEN

DP

04/14/2009

Electronic Signature of Signing Officer or Director

Date