

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07899

FILED  
Mar 20, 2009  
Secretary of State

Entity Name: SEMINOLE COVE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

504 NW 5TH AVENUE  
OKEECHOBEE, FL 34972 US

**New Principal Place of Business:**

**Current Mailing Address:**

504 NW 5TH AVENUE  
OKEECHOBEE, FL 34972 US

**New Mailing Address:**

FEI Number: 65-0034031

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MCGLAMORY, BEN  
1647 SW 35TH CIRCLE  
OKEECHOBEE, FL 34974 US

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

SEARCY, DIANE  
1602 SW 35TH CIRCLE  
OKEECHOBEE, FL 34974 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: DIANE SEARCY

03/20/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: S ( ) Delete  
Name: ALLEN, JOE  
Address: 1593 SW 35TH CIRCLE  
City-St-Zip: OKEECHOBEE, FL 34974

Title: V ( ) Delete  
Name: MCPHERSON, BOB  
Address: 1510 SW 35TH CIRCLE  
City-St-Zip: OKEECHOBEE, FL 34974

Title: P ( ) Delete  
Name: MCGLAMORY, BEN  
Address: 1647 SW 35TH CIRCLE  
City-St-Zip: OKEECHOBEE, FL 34974

Title: T ( ) Delete  
Name: HENSEL, VIVIAN  
Address: 1707 SW 35TH CIRCLE  
City-St-Zip: OKEECHOBEE, FL 34974

Title: D ( ) Delete  
Name: ADAMS, JACK  
Address: 1748 SW 35TH CIRCLE  
City-St-Zip: OKEECHOBEE, FL 34974

Title: D ( ) Delete  
Name: SCHALEBEN, BETTY  
Address: 1593 SW 35TH CIR  
City-St-Zip: OKEECHOBEE, FL 34974

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: ALLEN, JOE  
Address: 1539 SW 35TH CIRCLE  
City-St-Zip: OKEECHOBEE, FL 34974

Title: V (X) Change ( ) Addition  
Name: LANDRY, ART  
Address: 1628 SW 35TH CIRCLE  
City-St-Zip: OKEECHOBEE, FL 34974

Title: S (X) Change ( ) Addition  
Name: SEARCY, DIANE  
Address: 1602 SW 35TH CIRCLE  
City-St-Zip: OKEECHOBEE, FL 34974

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

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

Title: D (X) Change ( ) Addition  
Name: ANDRES, JANICE  
Address: 1562 SW 35TH CIR  
City-St-Zip: OKEECHOBEE, FL 34974

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: VIVIAN HENSEL

T

03/20/2009

Electronic Signature of Signing Officer or Director

Date