

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11927

FILED  
Apr 07, 2008  
Secretary of State

Entity Name: SMUGGLERS COVE HOMEOWNERS ASSOCIATION, INC.

## Current Principal Place of Business:

1634 SMUGGLERS CIR  
GULF BREEZE, FL 32563 US

## New Principal Place of Business:

## Current Mailing Address:

1634 SMUGGLERS CIR  
GULF BREEZE, FL 32563 US

## New Mailing Address:

FEI Number: 59-3062024

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MILLER, DIANA PRES  
1621 SMUGGLERS CIR  
GULF BREEZE, FL 32563 US

## Name and Address of New Registered Agent:

HIDALGO, CHERI L PRES  
1748 E SMUGGLERS COVE DRIVE  
GULF BREEZE, FL 32563 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: CHERI L. HIDALGO

04/07/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: MILLER, DIANA  
Address: 1621 SMUGGLERS CIR  
City-St-Zip: GULF BREEZE, FL 32563

Title: V.P. ( ) Delete  
Name: HIDALGO, CHERI  
Address: 1748 SMUGGLERS COVE DR  
City-St-Zip: GULF BREEZE, FL 32563

Title: TREA ( ) Delete  
Name: WALKER, BEN  
Address: 1729 W SMUGGLERS COVE DR  
City-St-Zip: GULF BREEZE, FL 32563

Title: SEC ( ) Delete  
Name: BIBEAU, SARA  
Address: 1700 SMUGGLERS COVE DR  
City-St-Zip: GULF BREEZE, FL 32563

Title: MAA ( ) Delete  
Name: GORCZYKA, SUE  
Address: 1705 SMUGGLERS COVE DR  
City-St-Zip: GULF BREEZE, FL 32563

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: HIDALGO, CHERI L  
Address: 1621 SMUGGLERS CIR  
City-St-Zip: GULF BREEZE, FL 32563

Title: V.P. (X) Change ( ) Addition  
Name: WARE, NORMA  
Address: 1709 W SMUGGLERS COVE DR  
City-St-Zip: GULF BREEZE, FL 32563

Title: TREA (X) Change ( ) Addition  
Name: MILLER, MARSHALL  
Address: 1621 SMUGGLERS COVE CIRCLE  
City-St-Zip: GULF BREEZE, FL 32563

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

Title: MAA (X) Change ( ) Addition  
Name: GONZALEZ, BUD  
Address: 1645 SMUGGLER CIRCLE  
City-St-Zip: GULF BREEZE, FL 32563

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: CHERI L. HIDALGO

PRES

04/07/2008

Electronic Signature of Signing Officer or Director

Date