

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13748

FILED
Apr 17, 2009
Secretary of State

Entity Name: THE COVE OF STONEBRIDGE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

21045 COMMERCIAL TRAIL
BOCA RATON, FL 33486 US

New Principal Place of Business:

Current Mailing Address:

21045 COMMERCIAL TRAIL
BOCA RATON, FL 33486 US

New Mailing Address:

FEI Number: 59-2669404

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WILLIAM K. ISAACSON,
21045 COMMERCIAL TRAIL
BOCA RATON, FL 33486 US

Name and Address of New Registered Agent:

ISAACSON, WILLIAM K
21045 COMMERCIAL TRAIL
BOCA RATON, FL 33486 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: WILLIAM K. ISAACSON

04/17/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD (X) Delete
Name: MILLIER, HARVEY
Address: 10122 SPY GLASS WAY
City-St-Zip: BOCA RATON, FL 33498

Title: V () Delete
Name: POSNER, NORMAN
Address: 10177 SPYGLASS WAY
City-St-Zip: BOCA RATON, FL

Title: P () Delete
Name: LEVY, LARRY
Address: 10176 SPYGLASS WAY
City-St-Zip: BOCA RATON, FL

Title: D () Delete
Name: ACKERMAN, HOWARD
Address: 10090 SPY GLASS WAY
City-St-Zip: BOCA RATON, FL 33498

Title: T () Delete
Name: LEIPZIG, MURRAY
Address: 10192 SPY CLASS WAY
City-St-Zip: BOCA RATON, FL 33498

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: S/T (X) Change () Addition
Name: LEIPZIG, MURRAY
Address: 10192 SPY CLASS WAY
City-St-Zip: BOCA RATON, FL 33498

Title: D () Change (X) Addition
Name: ZALE, MARVIN
Address: 10161 SPYGLASS WAY
City-St-Zip: BOCA RATON, FL 33498

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: LARRY LEVY

P

04/17/2009

Electronic Signature of Signing Officer or Director

Date