

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17085

FILED
Jan 16, 2009
Secretary of State

Entity Name: FRANK ESTATES CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

12540 FRANK DR S
SEMINOLE, FL 337761729 US

New Principal Place of Business:

Current Mailing Address:

12540 FRANK DR S
SEMINOLE, FL 33776

New Mailing Address:

12540 FRANK DR S
SEMINOLE, FL 337761729 US

FEI Number: 59-2778821

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUNTON, JEANNE A
12540 FRANK DR S
SEMINOLE, FL 33776 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: D () Delete
Name: SHEARY, MARY ANN,
Address: 12730 FRANK DR. N.
City-St-Zip: SEMINOLE, FL

Title: D () Delete
Name: FENECH, JOHN
Address: 9870 FRANK DRIVE W
City-St-Zip: SEMINOLE, FL 33776

Title: D () Delete
Name: JACOBS, KATHLEEN
Address: 12571 FRANK DR S
City-St-Zip: SEMINOLE, FL

Title: TD () Delete
Name: DUNTON, JEANNE A,
Address: 12540 FRANK DR S
City-St-Zip: SEMINOLE, FL

Title: PD () Delete
Name: STILWELL, JEFFREY
Address: 12500 FRANK DRIVE SOUTH
City-St-Zip: SEMINOLE, FL 33776

Title: SD () Delete
Name: BUSCH, SUE
Address: 9840 FRANK DR W
City-St-Zip: SEMINOLE, FL

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
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Address:
City-St-Zip:

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

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: JEANNE A DUNTON

TD

01/16/2009

Electronic Signature of Signing Officer or Director

Date