

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30267

FILED
Jul 11, 2009
Secretary of State

Entity Name: SNUG HARBOR COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

7645 KYAK COURT
MICCO, FL 32976

New Principal Place of Business:

Current Mailing Address:

7645 KYAK COURT
MICCO, FL 32976

New Mailing Address:

FEI Number: 59-2648012 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LAGGNER, JANE H
7512 CHASTA ROAD
MICCO, FL 32976 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: P () Delete
Name: LAGGNER, JANE
Address: 7512 CHASTA ROAD
City-St-Zip: SEBASTIAN, FL 32976

Title: VP () Delete
Name: CONNORS, SANDRA
Address: 7616 CHASTA RD
City-St-Zip: MICCO, FL 32976

Title: S (X) Delete
Name: BERGAMINI, MARIE
Address: 7660 GREAT BEAR LAKE DR
City-St-Zip: MICCO, FL 32976

Title: D () Delete
Name: SAVINO, MARGE
Address: 7541 NIAN TIC AVE
City-St-Zip: MICCO, FL 32976

Title: D () Delete
Name: UPPERMAN, LORRAINE
Address: 7674 FOV HUNTER CIR
City-St-Zip: MICCO, FL 32976

Title: T () Delete
Name: BRANDT, ALFRED
Address: 7558 MONTAUK AVE.
City-St-Zip: MICCO, FL 32976

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 (X) Change () Addition
Name: UPPERMAN, LORRAINE
Address: 7674 FOV HUNTER CIR
City-St-Zip: MICCO, FL 32976

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: JANE H. LAGGNER

PRES

07/11/2009

Electronic Signature of Signing Officer or Director

Date