## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43528

Apr 21, 2010 Secretary of State

Entity Name: BRADFORD COVE RECREATION ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

225 S WESTMONTE DRIVE 225 S WESTMONTE DR

**SUITE 3310** STE #3310

ALTAMONTE SPRINGS, FL 32714 US ALTAMONTE SPRINGS, FL 32714 US

**Current Mailing Address:** New Mailing Address:

C/O VISTA COMMUNITY ASSOCIATION MANAGEMENT PO BOX 162147

P.O. BOX 162147

ALTAMONTE SPRINGS, FL 327162147 US

ALTAMONTE SPRINGS, FL 32716 US

FEI Number: 59-3070374 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

WOMACK, ELLEN R VISTA COMMUNITY ASSOCIATION MANAGEMENT 225 S WESTMONTE DR

225 S WESTMONTE DRIVE **SUITE 3310** #3310

ALTAMONTE SPRINGS, FL 32714 US ALTAMONTE SPRINGS, FL 32714 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: ELLEN R WOMACK 04/21/2010

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

BOOSKOS, BEATRICE Name: Address: 8141 WOODSWORTH DR City-St-Zip: ORLANDO, FL 32817

Title:

Name: ORTIZ, ALBERTO Address: 8104 WOODSWORTH DR City-St-Zip: ORLANDO, FL 32817

I hereby 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 all other like empowered.

SIGNATURE: BEATRICE BOOSKOS DP 04/21/2010