

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47566

FILED
May 05, 2009
Secretary of State

Entity Name: SECRET COVE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 1166
EATON PARK, FL 33840

New Principal Place of Business:

2028 DANTE ST
LAKELAND, FL 33801

Current Mailing Address:

P.O. BOX 1166
EATON PARK, FL 33840

New Mailing Address:

FEI Number: 59-3134250 **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:

PHELPS, CAROL
3310 ANCHOR LANE
LAKELAND, FL 33801 US

Name and Address of New Registered Agent:

STARK, DONNA M DR
2028 DANTE ST
LAKELAND, FL 33801 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: DONNA STARK

05/05/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HUTCHINS, KEN
Address: 1002 CAPTIVA PT
City-St-Zip: LAKELAND, FL 33801

Title: STD () Delete
Name: PHELPS, CAROL
Address: 3310 ANCHOR LANE
City-St-Zip: LAKELAND, FL 33801

Title: PD () Delete
Name: MEYERS, GLORIA
Address: 936 CAPTIVA PT
City-St-Zip: LAKELAND, FL 33801

Title: D () Delete
Name: STARK, DONNA
Address: 2028 DANTE ST
City-St-Zip: LAKELAND, FL 33801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HUTCHINS, KEN MR
Address: 1002 CAPTIVA PT
City-St-Zip: LAKELAND, FL 33801

Title: STD (X) Change () Addition
Name: STARK, DONNA DR
Address: 2028 DANTE ST
City-St-Zip: LAKELAND, FL 33801

Title: PD (X) Change () Addition
Name: SHELBURNE, JOHN MR
Address: 2028 DANTE ST
City-St-Zip: LAKELAND, FL 33801

Title: VPD (X) Change () Addition
Name: REWAH, HEMCHAND MR
Address: 301 KASSIK CIRCLE
City-St-Zip: ORLANDO, FL 32824

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: DONNA STARK

STD

05/05/2009

Electronic Signature of Signing Officer or Director

Date