

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48790

FILED
May 01, 2010
Secretary of State

Entity Name: FRUIT COVE ESTATES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1459 OTOES PLACE
JACKSONVILLE, FL 32259 US

New Principal Place of Business:

Current Mailing Address:

1459 OTOES PLACE
JACKSONVILLE, FL 32259 US

New Mailing Address:

FEI Number: 59-3225068 **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:

TOMLINSON, FRED
11338 SAN JOSE BLVD.
JACKSONVILLE, FL 32223 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/D
Name: GENTRY, BRIAN
Address: 1452 TAMA-RAN PL
City-St-Zip: JACKSONVILLE, FL 32259 US

Title: VP/D
Name: CANEPA, VALERIE
Address: 612 IRENE COURT
City-St-Zip: JACKSONVILLE, FL 32259

Title: S
Name: BLAKE, STEVE
Address: 604 IRENE CT
City-St-Zip: JACKSONVILLE, FL 32259

Title: T
Name: WESTER, JOHN F
Address: 1459 OTOES PL
City-St-Zip: JACKSONVILLE, FL 32259

Title: DM
Name: EDWARDS, MARION
Address: 1497 OTOES PL
City-St-Zip: JACKSONVILLE, FL 32259

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: JOHN F. WESTER

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05/01/2010

Electronic Signature of Signing Officer or Director

Date