

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49102

FILED
Apr 14, 2009
Secretary of State

Entity Name: CATALPA COVE PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

711 TARPON BAY RD.
SANIBEL, FL 33957 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 100
SANIBEL, FL 33957 US

New Mailing Address:

FEI Number: 65-0341450

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACKESY, STEVEN
711 TARPON BAY RD.
SANIBEL, FL 33957 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: PARKER, SY
Address: 15981 CATALPA COVE
City-St-Zip: FORT MYERS, FL 33908

Title: V () Delete
Name: STEINHOFF, GARY
Address: 13611 CHINA BERRY WAY
City-St-Zip: FORT MYERS, FL 33908

Title: T () Delete
Name: HARTMANN, KENNETH
Address: 15631 CATALPA COVE DR
City-St-Zip: FORT MYERS, FL 33908

Title: SD () Delete
Name: BRINEGAR, LARRY
Address: 15540 CATARPA COVE
City-St-Zip: FORT MYERS, FL 33908

Title: D () Delete
Name: HARTMANN, KENNETH
Address: 15631 CATARPA COVE DR
City-St-Zip: FORT MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PARKER, SY
Address: 15981 CATALPA COVE
City-St-Zip: FORT MYERS, FL 33908

Title: SD (X) Change () Addition
Name: TIDMORE, WILLIAM
Address: 13561 CHINA BERRY WAY
City-St-Zip: FT MYERS, FL 33908 US

Title: TD (X) Change () Addition
Name: BRINEGAR, LARRY
Address: 15540 CATALPA COVE DR
City-St-Zip: FORT MYERS, FL 33908

Title: D (X) Change () Addition
Name: GALLOWAY, DAVID
Address: 15920 CATALPA COVE DR
City-St-Zip: FORT MYERS, FL 33908

Title: VD (X) Change () Addition
Name: HARTMANN, KENNETH
Address: 15631 CATARPA COVE DR
City-St-Zip: FORT MYERS, FL 33908

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: SY PARKER

PD

04/14/2009

Electronic Signature of Signing Officer or Director

Date