## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N92000000200

FILED Jun 15, 2009 Secretary of State

Entity Name: THE COVERED PORCH CONDOMINIUM ASSOCIATION, INC.

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

752 NORTH WESTMORELAND DRIVE 752 N. WESTMORELAND DR. ORLANDO, FL 32804 US 0RLANDO, FL 32804 US

Current Mailing Address: New Mailing Address:

150 E. ROBINSON ST. #2406

ORLANDO, FL 32801 US

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) 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: Name and Address of New Registered Agent:

HARPER, RUSSELL W PRES.
752 N WESTMORELAND DRIVE
HARPER, RUSSELL W PRES.
150 E. ROBINSON ST.

ORLANDO, FL 32804 US # 2406

ORLANDO, FL 32801 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.

01011171175 - 51100511 - 110755

SIGNATURE: RUSSELL HARPER 06/15/2009

Electronic Signature of Registered Agent

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

Fitle: SECR ( ) Delete Title: SECR (X) Change ( ) Addition

 Name:
 DREVERS, BROOKE N
 Name:
 THESSIN, MICHAEL

 Address:
 756 N WESTMORELAND DR
 Address:
 150 E. ROBINSON ST.

 City-St-Zip:
 ORLANDO, FL 32804
 City-St-Zip:
 ORLANDO, FL 32801

Title: TRES ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 DODGE, GIGI
 Name:

 Address:
 752 N WESTMORELAND DR
 Address:

 City-St-Zip:
 ORLANDO, FL 32804
 City-St-Zip:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition

Name: HARPER, RUSS Name: HARPER, RUSS

Address: 752 N WESTMORELAND DR Address: 150 E. ROBINSON ST., #2406

City-St-Zip: ORLANDO, FL 32804 City-St-Zip: ORLANDO, FL 32801

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: RUSSELL HARPER PD 06/15/2009