2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000001032

FILED Mar 15, 2009 Secretary of State

Entity Name: UPPER CAPTIVA CIVIC ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: P O BOX 423 4320 SOL VISTA LN. PINELAND, FL 33945 CAPTIVA, FL 33924 US US **Current Mailing Address: New Mailing Address:** P O BOX 423 PINELAND, FL 33945 US FEI Number: 65-0392810 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: DONNELLY, RICHARD R DONNELLY, RICHARD R 13490 ROBÉRTS RD 13490 ROBERTS RD PINELAND, FL 33945 US POB 254 PINELAND, FL 33945 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: 03/15/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition STEPHENS, CAROLYN FISHER, GARY Name: Name: 4540 ESCONOIDO LN Address: 4521 PANAMA SHELL DR. Address: City-St-Zip: CAPTIVA, FL 33924 City-St-Zip: CAPTIVA, FL 33924 Title: () Delete Title: () Change () Addition DETURE, FRANCIS Name: Name: Address: 8161 MAIN STREET Address: City-St-Zip: BOKEELIA, FL 33922 City-St-Zip: Title: () Delete Title: () Change () Addition MURPHY, ANNE Name: Name: 4560 CUTLASS DR Address: Address: City-St-Zip: CAPTIVA, FL 33924 City-St-Zip: Title: DS () Delete Title: () Change () Addition COUSAR, SUE ANN Name: Name: 4580 HIDDEN LN Address: Address: City-St-Zip: CAPTIVA, FL 33924 City-St-Zip: Title: Title: () Delete () Change () Addition FULLER, MARIAN Name: Name: 4590 ORO PESOS LN Address: Address: City-St-Zip: CAPTIVA, FL 33924 City-St-Zip: Title:

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.

Name:

Address:

City-St-Zip:

SIGNATURE: FRANCIS DETURE DP 03/15/2009

() Delete

TOMPKINS, DAVID

CAPTIVA, FL 33924

4591 HOLDE PODGE LN

Title:

Name:

Address:

City-St-Zip:

(X) Change () Addition

HORSLEY, SAM

4300 POINT HOUSE TR.

CAPTIVA, FL 33924