2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000557

Entity Name: LA JOYA COVE ASSOCIATION, INC.

FILED Apr 23, 2009 Secretary of State

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

2180 WEST SR 434 STE 5000

LONGWOOD, FL 32779 US

Current Mailing Address: New Mailing Address:

2180 WEST SR 434 STE 5000

LONGWOOD, FL 32779 US

FEI Number: 59-3219030 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:

HART, JAMES W JR SENTRY MANAGEMENT INC 2180 WEST SR 434 STE 5000 LONGWOOD, FL 32779 US

OFFICERS AND DIRECTORS:

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

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ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 STERMER, JERRY
 Name:
 STERMER, TERRY

 Address:
 4868 ROBBINS AVE
 Address:
 4868 ROBBINS AVE

 City-St-Zip:
 ORLANDO, FL 32808
 City-St-Zip:
 ORLANDO, FL 32808

Title: VPD () Delete Title: SD (X) Change () Addition Name: HARRIS, ISTRA Name: HARRIS, ISTRA

 Address:
 4001 SADDLEWOOD DR
 Address:
 4001 SADDLEWOOD DR

 City-St-Zip:
 ORLANDO, FL 32818
 City-St-Zip:
 ORLANDO, FL 32818

Title: STD () Delete Title: VPD (X) Change () Addition

 Name:
 GAMMONS, HAYDEE
 Name:
 GAMMONS, HAYDEE

 Address:
 4849 ROBBINS AVE
 Address:
 4849 ROBBINS AVE

 City-St-Zip:
 ORLANDO, FL 32808
 City-St-Zip:
 ORLANDO, FL 32808

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: TERRY STERMER PD 04/23/2009