

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003604

FILED
Apr 10, 2009
Secretary of State

Entity Name: EGRET COVE AT MAPLEWOOD HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

103 EGRET DR
JUPITER, FL 33458 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1129
JUPITER, FL 334681129 US

New Mailing Address:

FEI Number: 59-3234615

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GASSMANN, KATHLEEN A
601-A PINECREST CIR
JUPITER, FL 33458 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: SD () Delete
Name: CONNELL, PHILLIP
Address: 115 SPOONBILL CT
City-St-Zip: JUPITER, FL 33458

Title: PD () Delete
Name: BYLSMA, JOHN
Address: 131 EGRET DR
City-St-Zip: JUPITER, FL 33458

Title: TD () Delete
Name: AFT, LARRY
Address: 113 EGRET DRIVE
City-St-Zip: JUPITER, FL 33458

Title: VP () Delete
Name: SMITH, FRANK
Address: 110 SPOONBILL CT
City-St-Zip: JUPITER, FL 33458

Title: D () Delete
Name: METOT, MELVIN
Address: 124 SPOONBILL CT
City-St-Zip: JUPITER, FL 33458

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: AFT, LARRY
Address: 113 EGRET DRIVE
City-St-Zip: JUPITER, FL 33458

Title: VP (X) Change () Addition
Name: BYLSMA, JOHN
Address: 131 EGRET DR
City-St-Zip: JUPITER, FL 33458

Title: SECT (X) Change () Addition
Name: CONNELL, PHILLIP
Address: 115 SPOONBILL CT.
City-St-Zip: JUPITER, FL 33458

Title: TREA (X) Change () Addition
Name: DENNEHY, JOHN
Address: 117 EGRET DRIVE
City-St-Zip: JUPITER, FL 33458

Title: DIR (X) Change () Addition
Name: DAILEY, MARY LOU
Address: 117 SPOONBILL CT
City-St-Zip: JUPITER, FL 33458

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: LARRY AFT

PRES

04/10/2009

Electronic Signature of Signing Officer or Director

Date