

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005556

FILED
Feb 24, 2009
Secretary of State

Entity Name: SHIPWATCH NINE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

11900 SHIPWATCH DRIVE
LARGO, FL 33774 US

New Principal Place of Business:

Current Mailing Address:

11900 SHIPWATCH DRIVE
LARGO, FL 33774 US

New Mailing Address:

FEI Number: 59-3225343

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COMMUNITY MANAGEMENT CONCEPTS, INC.
4585 140TH AVE. NORTH SUITE 1012
CLEARWATER, FL 33762 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: SNADERS, JUDY
Address: 14840 SHIP WATCH TRACE 1924
City-St-Zip: LARGO, FL 33774

Title: VPD (X) Delete
Name: MELCHIORRI, FRED
Address: 14702 SHIPWATCH TRACE
City-St-Zip: LARGO, FL 33774

Title: TD () Delete
Name: ULLRICH, RAINER
Address: 14701 SHIPWATCH TRACE #1953
City-St-Zip: LARGO, FL 33774

Title: D () Delete
Name: WHITNEY, TODD
Address: 14880 SHIPWATCH TRACE 1912
City-St-Zip: LARGO, FL 33774

Title: PD () Delete
Name: HANSEN, ROGER
Address: 14890 SHIPWATCH TRACE
City-St-Zip: LARGO, FL 33774

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: WHITNEY, TODD
Address: 14880 SHIPWATCH TRACE 1912
City-St-Zip: LARGO, FL 33774

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ROGER HANSEN

P

02/24/2009

Electronic Signature of Signing Officer or Director

Date