

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002531

FILED  
Jan 05, 2010  
Secretary of State

**Entity Name:** EMERALD COVE AT CAPE CORAL COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O BENSON'S, INC.  
12650 WHITEHALL DR  
FORT MYERS, FL 33907

**New Principal Place of Business:**

**Current Mailing Address:**

C/O BENSON'S INC  
12650 WHITEHALL DR  
FT MEYERS, FL 33907

**New Mailing Address:**

**FEI Number:** 65-0650270

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

VANDALL, BONITA D  
12650 WHITEHALL DR  
FORT MYERS, FL 33907 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  
**Name:** JOHNSON, EDWARD  
**Address:** 1631 EMERALD COVE DR  
**City-St-Zip:** CAPE CORAL, FL 33991

**Title:** D  
**Name:** COTTRILL, DON  
**Address:** 1740 EMERALD COVE CIR  
**City-St-Zip:** CAPE CORAL, FL 33991

**Title:** D  
**Name:** DETHLEFS, GERALD  
**Address:** 1821 EMERALD COVE DR  
**City-St-Zip:** CAPE CORAL, FL 33991

**Title:** PD  
**Name:** YELVINGTON, NINA  
**Address:** 424 EMERALD COVE LN  
**City-St-Zip:** CAPE CORAL, FL 33991

**Title:** VD  
**Name:** CAPICCHIONI, ELLEN  
**Address:** 1636 EMERALD COVE DR  
**City-St-Zip:** CAPE CORAL, FL 33991

**Title:** TD  
**Name:** BUCK, JAMES  
**Address:** 1707 EMERALD COVE DR  
**City-St-Zip:** CAPE CORAL, FL 33991

I hereby 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 all other like empowered.

**SIGNATURE:** NINA YELVINGTON

PRES

01/05/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date