

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002580

FILED
Jan 15, 2009
Secretary of State

Entity Name: REDFISH COVE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

BENSON'S, INC.
12650 WHITEHALL DR
FORT MYERS, FL 33907 US

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

FEI Number: 59-3369513 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: PD () Delete
Name: INMAN, EDNA SUE
Address: 24068 REDFISH COVE DRIVE
City-St-Zip: PUNTA GORDA, FL 33955 US

Title: VD () Delete
Name: JOHNSON, ALAN
Address: 24117 REDFISH COVE DR
City-St-Zip: PUNTA GORDA, FL 33955 US

Title: STD () Delete
Name: DOBBINS, JIM
Address: 24074 REDFISH COVE DR
City-St-Zip: PUNTA GORDA, FL 33955 US

Title: D () Delete
Name: PATTON, SONDRRA
Address: 24050 REDFISH COVE DR.
City-St-Zip: PUNTA GORDA, FL 33955

Title: D () Delete
Name: LANGE, NANCY
Address: 24025 REDFISH COVE CT
City-St-Zip: PUNTA GORDA, FL 33955

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: BUCCI, ROBERT
Address: 24086 REDFISH COVE DRIVE
City-St-Zip: PUNTA GORDA, FL 33955 US

Title: PD (X) Change () Addition
Name: JOHNSON, ALAN
Address: 24117 REDFISH COVE DR
City-St-Zip: PUNTA GORDA, FL 33955 US

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

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

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: ALAN JOHNSON

PRES

01/15/2009

Electronic Signature of Signing Officer or Director

_____ Date