

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005990

FILED  
Apr 15, 2009  
Secretary of State

Entity Name: NANTUCKET COTTAGES OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

50 MONACO STREET  
DESTIN, FL 32550 US

**New Principal Place of Business:**

**Current Mailing Address:**

546 MARY ESTHER CUT OFF STE 3  
FORT WALTON BEACH, FL 32548 US

**New Mailing Address:**

FEI Number: 59-3535051      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ROGERS, ANGELA  
50 MONACO STREET  
DESTIN, FL 32550 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: P ( ) Delete  
Name: BUCKLEY, SUE  
Address: 5955 PLANTATION DR  
City-St-Zip: ROSWELL, GA 30075

Title: VP ( ) Delete  
Name: MATHIS, WILLIAM J  
Address: POST OFFICE BOX 8571  
City-St-Zip: DOTHAN, AL 36304

Title: ST ( ) Delete  
Name: TAYLOR, MICHELLE  
Address: 1551 RIDGE ROAD  
City-St-Zip: BANGOR, PA 18013

Title: D ( ) Delete  
Name: ROGERS, ANGELA  
Address: 50 MONACO STREET  
City-St-Zip: DESTIN, FL 32550 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: JORGENSEN, MARILYN  
Address: 41 OCEAN DRIVE  
City-St-Zip: PUNTA GORDA, FL 33950

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

Title: T (X) Change ( ) Addition  
Name: BUCKLEY, RON  
Address: 5955 PLANTATION DRIVE  
City-St-Zip: ROSWELL, GA 30075

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

Title: D ( ) Change (X) Addition  
Name: MICHELLE, TAYLOR  
Address: 1551 RIDGE ROAD  
City-St-Zip: BANGOR, PA 18013

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: ANGELA ROGERS

D

04/15/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date