

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000383

FILED
Apr 20, 2009
Secretary of State

Entity Name: BRENDAN COVE MARINA ASSOCIATION, INC.

Current Principal Place of Business:

C/O SANDCASTLE COMMUNITY MGMT
1719 TRADE CENTER WAY #4
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 8478
NAPLES, FL 34101

New Mailing Address:

FEI Number: 65-0814807

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMAS, BRAD
C/O SANDCASTLE COMMUNITY MANAGEMENT, INC.
1719 TRADE CENTER WAY #4
NAPLES, FL 34109 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: PAPPAS, RALPH
Address: 27120 DRIFTWOOD LANE
City-St-Zip: BONITA SPRINGS, FL 34135

Title: S () Delete
Name: GLOCK, STEVE
Address: 4125 BIENDAN COURT
City-St-Zip: BONITA SPRINGS, FL 34135

Title: T () Delete
Name: BOURGEOIS, ED
Address: 9186 BRENDAN PRESERVE CT
City-St-Zip: BONITA SPRINGS, FL 34135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PAPPAS, RALPH
Address: 27120 DRIFTWOOD LANE
City-St-Zip: BONITA SPRINGS, FL 34135

Title: SD (X) Change () Addition
Name: GLOCK, STEVE
Address: 9125 BRENDAN COURT
City-St-Zip: BONITA SPRINGS, FL 34135

Title: TD (X) Change () Addition
Name: BOURGEOIS, ED
Address: 9186 BRENDAN PRESERVE CT
City-St-Zip: BONITA SPRINGS, FL 34135

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: ED BOURGEOIS

TD

04/20/2009

Electronic Signature of Signing Officer or Director

Date