

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003435

FILED
Apr 10, 2009
Secretary of State

Entity Name: SHINDLER COVE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

5639 COLDSTREAM COURT
JACKSONVILLE, FL 32222

New Principal Place of Business:

Current Mailing Address:

PO BOX 7414
JACKSONVILLE, FL 32222

New Mailing Address:

FEI Number: 59-3526940

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMMONS, GREGG
5639 COLDSTREAM CT
JACKSONVILLE, FL 32222 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: SIMMONS, GREGG
Address: 5639 COLDSTREAM CT
City-St-Zip: JACKSONVILLE, FL 32222

Title: ST () Delete
Name: BOREE, GREG
Address: HOPKINS ST
City-St-Zip: ORANGE PARK, FL 32073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: NANCY SIMMONS

MGR

04/10/2009

Electronic Signature of Signing Officer or Director

Date