## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000006885

**FILED** Feb 15, 2007 Secretary of State

Entity Name: CUDJOE COVE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

21270 CONCH DRIVE 21260 CONCH DRIVE

CUDJOE KEY, FL 33042 CUDJOE KEY, FL 33042 US US

**Current Mailing Address: New Mailing Address:** 

3501 RUSSELL THOMAS LANE PO BOX 420761 SUMMERLAND KEY, FL 33042 US DAVIDSONVILLE, MD 21035 US

FEI Number: 65-0905744 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MUNSON, ROBERT G MAZZA, JAN M 21270 CONCH DRIVE 21260 CONCH DRIVE

CUDJOE KEY, FL 33042 US CUDJOE KEY, FL 33042 US

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: JAN MAZZA 02/15/2007

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition MAZZA, JAN Name: MAZZA, JAN Name:

21260 CONCH DRIVE Address: 3501 RUSSELL THOMAS LANE Address: City-St-Zip: CUDJOE KEY, FL 33042 US City-St-Zip: DAVIDSONVILLE, MD 21035 US

(X) Change ( ) Addition Title: () Delete Title: SD

Name: MUNSON, ROBERT G Name: REISS, JENNIFER Address: 21270 CONCH DR Address: 21230 CONCH DR City-St-Zip: CUDJOE KEY, FL 33042 US City-St-Zip: CUDJOE KEY, FL 33042 US

Title: () Delete Title: PD (X) Change ( ) Addition SILVERSTEIN, THEA Name: SILVERSTEIN, THEA Name:

730 FITZWATER STREET 352 WYLDHAVEN ROAD Address: Address: City-St-Zip: PHILADELPHIA, PA 19147 US City-St-Zip: ROSEMONT, PA 19010 US

I hereby certify that the information supplied with this filing does not qualify for the 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: JAN MAZZA TD 02/15/2007