# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 02, 2009**
**Secretary of State**

DOCUMENT# P02000130789

**Entity Name:** TREASURE COVE DEVELOPMENT CORP.

**Current Principal Place of Business:**

8825 TAMIAMI TRAIL
NAPLES, FL 34113

**New Principal Place of Business:**

**Current Mailing Address:**

8825 TAMIAMI TRAIL
NAPLES, FL 34113

**New Mailing Address:**

**FEI Number: 14-1875164** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

BURKE, CONSTANCE M
1107 WEST MARION AVENUE SUITE 112
PUNTA GORDA, FL 33950 US

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

BURKE, CONSTANCE M
247 N COLLIER BLVD
SUITE 202
MARCO ISLAND, FL 34145 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: CONSTANCE M. BURKE 04/02/2009
Electronic Signature of Registered Agent Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete
Name: DELANGE, LUIT
Address: 8825 TAMIAMI TRAIL EAST
City-St-Zip: NAPLES, FL 34113

Title: V ( ) Delete
Name: BOFF, JOE
Address: 8825 TAMIAMI TRAIL EAST
City-St-Zip: NAPLES, FL 34113

Title: T ( ) Delete
Name: BOBROW, JOEL I
Address: 8825 TAMIAMI TRAIL EAST
City-St-Zip: NAPLES, FL 34113

Title: S ( ) Delete
Name: SE DELANGE, GARDNER ULRIKE
Address: 8825 TAMIAMI TRAIL EAST
City-St-Zip: NAPLES, FL 34113

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

Title: P (X) Change ( ) Addition
Name: BOFF, JOSEPH D
Address: 8825 TAMIAMI TRAIL EAST
City-St-Zip: NAPLES, FL 34113

Title: VP (X) Change ( ) Addition
Name: BOBROW, JOEL I
Address: 8825 TAMIAMI TRAIL EAST
City-St-Zip: NAPLES, FL 34113

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOEL I. BOBROW VP 04/02/2009
Electronic Signature of Signing Officer or Director Date