

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006851

FILED  
Mar 10, 2009  
Secretary of State

**Entity Name:** OAK ISLAND COVE COMMUNITY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

7862 W IRLO BRONSON  
SUITE 128  
KISSIMMEE, FL 347471769

**New Principal Place of Business:**

2884 S. OSCEOLA AVE  
ORLANDO, FL 32806

**Current Mailing Address:**

7862 W IRLO BRONSON  
SUITE 128  
KISSIMMEE, FL 347471769

**New Mailing Address:**

WORLD OF HOMES  
ORLANDO, FL 32806

**FEI Number:** 59-3619121

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VON.BEHRN, GARY  
2872 BLOOMING ALAMANDA LP  
KISSIMMEE, FL 347472252 US

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

WORLD OF HOMES  
2884 S. OSCEOLA AVE.  
ORLANDO, FL 32806 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: EDDIE VARGAS, JR.

03/10/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: VON.BEHRN, GARY  
Address: 7862 W IRLO BRONSON HWY  
City-St-Zip: KISSIMMEE, FL 347471769

Title: D ( ) Delete  
Name: REESE, GARY  
Address: 7862 W IRLO BRONSON HWY  
City-St-Zip: KISSIMMEE, FL 347471769

Title: D ( ) Delete  
Name: DOYLE, KEVIN  
Address: 7862 W IRLO BRONSON WY  
City-St-Zip: KISSIMMEE, FL 347471769

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

Title: DP (X) Change ( ) Addition  
Name: VON.BEHRN, GARY  
Address: 7862 W IRLO BRONSON HWY  
City-St-Zip: KISSIMMEE, FL 347471769

Title: DTR (X) Change ( ) Addition  
Name: REESE, GARY  
Address: 7862 W IRLO BRONSON HWY  
City-St-Zip: KISSIMMEE, FL 347471769

Title: DVP (X) Change ( ) Addition  
Name: DOYLE, KEVIN  
Address: 7862 W IRLO BRONSON WY  
City-St-Zip: KISSIMMEE, FL 347471769

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: EDDIE VARGAS, JR.

PM

03/10/2009

Electronic Signature of Signing Officer or Director

Date