


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 03, 2008 8:00 am**  
**Secretary of State**

01-30-2008 90022 015 \*\*\*\*61.25

<b>DOCUMENT # 714779</b>					
1. Entity Name FISHERMAN'S COVE ASSOCIATION, INC.					
Principal Place of Business 9000 BLIND PASS ROAD SARASOTA, FL 34242		Mailing Address 9000 BLIND PASS ROAD SARASOTA, FL 34242			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-1232713	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent <del>THE LAW OFFICES OF LOREN HANSON &amp; WELLS, P.A. ATTN: KEVIN TWELLS, ESQ. 2033 MAIN ST, SUITE 403 SARASOTA, FL 34237</del>			7. Name and Address of New Registered Agent Maynard, Donald 9000 Blind Pass Road Sarasota, Florida 34242		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <i>Donald Maynard</i>		DATE <i>2-28-08</i>			
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITILE	T	<input checked="" type="checkbox"/> Delete	TITILE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	VANDERHOOF, WILLIAM		NAME	Robb, Jon	
STREET ADDRESS	215 GILMAN ROAD		STREET ADDRESS	7147 Creeks Crossings	
CITY-ST-ZIP	CHURCHVILLE, NY 14428		CITY-ST-ZIP	W. Bloomfield, MI 48322	
TITILE	P	<input type="checkbox"/> Delete	TITILE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WAUGH, BRUCE		NAME		
STREET ADDRESS	9000 BLIND PASS RD, B106		STREET ADDRESS		
CITY-ST-ZIP	SARASOTA, FL 34242		CITY-ST-ZIP		
TITILE	S	<input type="checkbox"/> Delete	TITILE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MANGIE, EVELYN		NAME		
STREET ADDRESS	4699 SPRING MEADOW LANE		STREET ADDRESS		
CITY-ST-ZIP	SARASOTA, FL 34239		CITY-ST-ZIP		
TITILE	V	<input type="checkbox"/> Delete	TITILE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DURAN, DON		NAME		
STREET ADDRESS	10485 UNITY RD		STREET ADDRESS		
CITY-ST-ZIP	NEW MIDDLETOWN, OH 44442		CITY-ST-ZIP		
TITILE		<input type="checkbox"/> Delete	TITILE	AS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	Maynard, Donald	
STREET ADDRESS			STREET ADDRESS	1201 Jessie Harbor Dr.	
CITY-ST-ZIP			CITY-ST-ZIP	Osprey, FL 34229	
TITILE		<input type="checkbox"/> Delete	TITILE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Bruce Waugh</i>		DATE: <i>1-28-08</i>		DAYTIME PHONE: <i>941-349-1400</i>	

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01072008 Chg-NP CR2E037 (12/06)

4. FEI Number 59-1232713 Applied For Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

SIGNATURE *Donald Maynard* DATE *2-28-08*

Filing Fee is \$61.25 Due by May 1, 2008 9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
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SIGNATURE: *Bruce Waugh* DATE: *1-28-08* DAYTIME PHONE: *941-349-1400*