

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720071

FILED
Feb 16, 2011
Secretary of State

Entity Name: EAST COVE COMMUNITY CLUB, INC.

Current Principal Place of Business:

EAST COVE COMMUNITY CLUB, INC.
C/O BARBARA CAZEAULT
INVERNESS, FL 34450

New Principal Place of Business:

Current Mailing Address:

EAST COVE COMMUNITY CLUB, INC.
C/O BARBARA CAZEAULT
INVERNESS, FL 34450

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CAZEAULT, BARBARA
10153 E BASS CIRCLE
INVERNESS, FL 34450 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: DS
Name: TRAWICK, ROBERT
Address: 10131 E BASS CIRCLE
City-St-Zip: INVERNESS, FL 34450

Title: D
Name: BEARDSLEY, PAUL
Address: 9921 E BASS CIRCLE
City-St-Zip: INVERNESS, FL 34450

Title: D
Name: QUEEN, JERRY
Address: 1110 S. SHINNER TEN
City-St-Zip: INVERNESS, FL 34450

Title: DP
Name: CAZEAULT, BARBARA
Address: 10153 E BASS CIRCLE
City-St-Zip: INVERNESS, FL 34450

Title: D
Name: TRAWICK, BERNICE N
Address: 10131 E. BASS CIRCLE
City-St-Zip: INVERNESS, FL 34450

I hereby 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 all other like empowered.

SIGNATURE: BARBARA CAZEAULT

RA

02/16/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date