

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 27, 2004 8:00 am
Secretary of State

02-27-2004 90023 040 ****61.25

DOCUMENT # 732187			
1. Entity Name COVE CAY VILLAGE I ASSOICATION, INC.			
Principal Place of Business 2619 COVE CAY DR CLEARWATER FL 33760		Mailing Address 2619 COVE CAY DR CLEARWATER FL 33760	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



MOORE CR2E037 (11/03)

4. FEI Number 59-2512295		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent PANAGROSSI, GERALD T 2619 COVE CAY DR CLEARWATER FL 33760		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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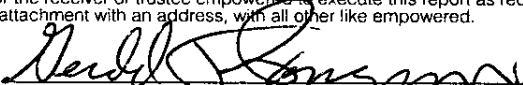
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25 Due By May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PENZI, RONALD 2617 COVE CAY DR #410 CLEARWATER FL 33760 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PENZI, RONALD ☒ Change ☐ Addition 2617 COVE CAY DR #410 CLEARWATER, FL 33760
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LATHROP, LARRY 2618 COVE CAY DR #906 CLEARWATER FL 33760 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	LATHROP, LARRY ☒ Change ☐ Addition 2618 COVE CAY DR #906 CLEARWATER, FL 33760
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GOLDMAN, BURT 2618 COVE CAY DR #207 CLEARWATER FL 33760 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DYE, JERRY ☐ Change ☒ Addition 2617 COVE CAY DR #407 CLEARWATER, FL 33760
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HENDRIX, BETTY 2617 COVE CAY DR #504 CLEARWATER FL 33760 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	HENDRIX, BETTY ☒ Change ☐ Addition 2617 COVE CAY DR #504 CLEARWATER, FL 33760
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/16/04 722-531-8515
Date Daytime Phone #