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	Mailing Address
2619 COVE CAY DR CLEARWATER FL 33760	2619 COVE CAY DR CLEARWATER FL 33760

MOORE CR2E037 (11/03)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

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

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 _____ DATE

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

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD PENZIK, RONALD 2617 COVE CAY DR #410 CLEARWATER FL 33760	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PENZIK, RONALD 2617 COVE CAY DR. #410 CLEARWATER, FL 33760 — ☒ Change ☐ Addition
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	PD LATHROP, LARRY 2618 COVE CAY DR #906 CLEARWATER, FL 33760 — ☒ Change ☐ Addition
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	VD DYE, JERRY 2617 COVE CAY DR. #407 CLEARWATER, FL 33760 — ☐ Change ☒ Addition
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	TD HENDRIX, BETTY 2617 COVE CAY DR #504 CLEARWATER, FL 33760 — ☒ Change ☐ Addition
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: _____ 2/16/04 727-531-8515

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #