

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754043

FILED
Jan 21, 2011
Secretary of State

Entity Name: THE COVES AT WHITE TROUT LAKE ASSOCIATION, INC.

Current Principal Place of Business:

10111 LAKE COVE LN
TAMPA, FL 33618 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 271284
TAMPA, FL 33688 US

New Mailing Address:

FEI Number: 59-2224760

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALCHEDIAK, NANCY
10111 LAKE COVE LANE
TAMPA, FL 33618 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: VD
Name: DELAROSA, LYNNE
Address: 10113 LAKE COVE LN
City-St-Zip: TAMPA, FL 33618

Title: SD
Name: BUTLER, ROBERT
Address: 10112 LAKE COVE LN
City-St-Zip: TAMPA, FL 33618

Title: PD
Name: CAPRIA, MICHAEL
Address: 10104 LAKE COVE LANE
City-St-Zip: TAMPA, FL 33618

Title: TD
Name: ALCHEDIAK, NANCY
Address: 10111 LAKE COVE LANE
City-St-Zip: TAMPA, FL 33618

Title: D
Name: FULLER, DAVID
Address: 10108 LAKE COVE LN
City-St-Zip: TAMPA, FL 33618

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: NANCY ALCHEDIAK

TD

01/21/2011

Electronic Signature of Signing Officer or Director

Date