

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Montemayor Secretary of State DIVISION OF CORPORATIONS
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APPROVED
AND
FILED

9 MAY -1 AM 9:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 755435 (5)
1. Corporation Name
PIRATE'S COVE CLUB CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business
1355-1375 PINELLAS BAYWAY
TIERRA VERDE FL 33715
US

Mailing Address
C/O RESOURCE PROPERTY MGMT
1001 EAST BAY DRIVE STE 4
LARGO FL 34641

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified 12/09/1980	3a. Date of Last Report 04/04/1994
4. FEI Number 59-2140319	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business 21	2a. Mailing Address 26 114 Pinellas BAYWAY
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28 Tierra Verde FL
Zip 24	Country 25 USA
Country 25	Zip 29 33715
Country 25	Zip 30 USA

9. Name and Address of Current Registered Agent
HAUSER, RICHARD B-
RESOURCE PROPERTY MANAGEMENT
1001 E. BAY DR. STE. 4
LARGO FL 34641

10. Name and Address of New Registered Agent 81 Name Alberto Freda 82 Street Address (P.O. Box Number is Not Acceptable) 114 Pinellas BAYWAY 83 84 City Tierra Verde FL 85 Zip Code 33715

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE DS	NAME FARRELL, SHELLY	11 TITLE P	HAL CUSICK
STREET ADDRESS 1375 PINELLAS BAYWAY #33	CITY- ST- ZIP TIERRA VERDE FL	12 NAME 1375 PINELLAS BAYWAY #38	13 STREET ADDRESS TIERRA VERDE, FL 33715
TITLE DP	NAME ENNO, HAL	21 TITLE VP	JIM ECKLES
STREET ADDRESS 1375 PINELLAS BAYWAY # 34	CITY- ST- ZIP TIERRA VERDE FL	22 NAME 1355 PINELLAS BAYWAY #5	23 STREET ADDRESS TIERRA VERDE, FL 33715
TITLE D	NAME MOSS, DEE D	31 TITLE T	RICHARD GONLIN
STREET ADDRESS 1375 PINELLAS BAYWAY #32	CITY- ST- ZIP TIERRA VERDE FL	32 NAME 1375 PINELLAS BAYWAY, #40	33 STREET ADDRESS TIERRA VERDE, FL 33715
TITLE DV	NAME HOULTON, JEANNE	41 TITLE S	
STREET ADDRESS 1355 PINELLAS BAYWAY, # 16	CITY- ST- ZIP TIERRA VERDE FL	42 NAME 43 STREET ADDRESS 44 CITY- ST- ZIP	
TITLE BT	NAME ALBERTO, KAREN	51 TITLE D	MICHAEL OLSKI
STREET ADDRESS 1355 PINELLAS BAYWAY #17	CITY- ST- ZIP TIERRA VERDE FL	52 NAME 1375 PINELLAS BAYWAY, #25	53 STREET ADDRESS TIERRA VERDE, FL 33715
TITLE D	NAME TAHANEY, GUYAN	61 TITLE D	EDWARD OLSON
STREET ADDRESS 1355 PINELLAS BAYWAY #8	CITY- ST- ZIP TIERRA VERDE FL	62 NAME 1375 PINELLAS BAYWAY, #39	63 STREET ADDRESS TIERRA VERDE, FL 33715
CITY- ST- ZIP TIERRA VERDE FL		64 CITY- ST- ZIP TIERRA VERDE, FL 33715	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual 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 12 or Block 13 if changed, or both in accordance with an affidavit.

SIGNATURE: [Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR