2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#759330

FILED Apr 20, 2011 Secretary of State

Entity Name: CASTAWAY COVE WAVE IV AND V HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

4380 U.S. HWY #1 1535 SOUTH 42ND CIRCLE VERO BEACH, FL 32967 US TENNIS/GAZEBO BUILDING

TENNIS/GAZEBO BUILDING VERO BEACH, FL 32967 US

Current Mailing Address: New Mailing Address:

4380 U.S. HWY #1 P. O. BOX 651309

VERO BEACH, FL 32967 US VERO BEACH, FL 32965 US

FEI Number: 59-2121652 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SPEECHLY, CLIFFORD S JR.

4380 U.S. HWY #1

VERO BEACH, FL 32967 US

SPEECHLY, CLIFFORD S JR.

1535 SOUTH 42ND CIRCLE

TENNIS/GAZEBO BUILDING

VERO BEACH, FL 32967 US

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: 04/20/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: V

Name: MCGARRY, SUSAN J Address: 1110 POITRAS DR.

City-St-Zip: VERO BEACH, FL 32963 US

Title: T

Name: COLLINS, GEORGE DR.
Address: 871 OYSTER SHELL LANE
City-St-Zip: VERO BEACH, FL 32963 US

Title:

Name: KNIGHT, RICHARD
Address: 1120 POITRAS DRIVE
City-St-Zip: VERO BEACH, FL 32963 US

Title: F

Name: WINGER, RICHARD
Address: 1361 INDIAN MOUND TRAIL
City-St-Zip: VERO BEACH, FL 32963 US

Title: V

 Name:
 CHESLEY, ROGER

 Address:
 1024 CASTAWAY BLVD.

 City-St-Zip:
 VERO BEACH, FL 32963 US

Title: ASM

Name: SPEECHLY, CLIFFORD S JR Address: 1535 SOUTH 42ND CIRCLE City-St-Zip: VERO BEACH, FL 32967 US

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: CLIFFORD S. SPEECHLY, JR. ASM 04/20/2011