

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000009182

FILED
May 18, 2005
Secretary of State

Entity Name: HIGH COVE, L.C.

Current Principal Place of Business:

330 SO. PINEAPPLE AVE.
SUITE 204
SARASOTA, FL 34236 US

New Principal Place of Business:

741 S. ORANGE
SARASOTA, FL 34236 US

Current Mailing Address:

P.O. BOX 15340
SARASOTA, FL 34277 US

New Mailing Address:

FEI Number: 59-3696764 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

RONAY, OLGA
655 41ST STREET
SARASOTA, FL 34234 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MEMBERS:

ADDITIONS/CHANGES:

Title: MGRM () Delete
Name: BRAIN, DAVID
Address: 615 CORWOOD DR
City-St-Zip: SARASOTA, FL 34234

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Delete
Name: MARTIN, RICHARD
Address: 2340 BRADENTON RD. 1#2
City-St-Zip: SARASOTA, FL 34239 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Delete
Name: MERRILL, ANNE L
Address: 1610 STICKNEY POINT ROAD, #201
City-St-Zip: SARASOTA, FL 34231 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Delete
Name: MOORE, JOHN D
Address: 655 41ST STREET
City-St-Zip: SARASOTA, FL 34234 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Delete
Name: RONAY, OLGA
Address: 655 41ST STREET
City-St-Zip: SARASOTA, FL 34234

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Delete
Name: MCNICOL, DANIEL E
Address: 1936 MORRILL STREET
City-St-Zip: SARASOTA, FL 34236

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ANNE L. MERRILL

M

05/18/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date