

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000009182

FILED  
Apr 27, 2012  
Secretary of State

Entity Name: HIGH COVE, L.C.

**Current Principal Place of Business:**

500 ARTISTS AVE  
ENGLEWOOD, FL 34223 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2097  
ENGLEWOOD, FL 34295 US

**New Mailing Address:**

FEI Number: 59-3696764

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RONAY, OLGA  
655 41ST STREET  
SARASOTA, FL 34234 US

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

MERRILL, ANNE  
500 ARTISTS AVE  
ENGLEWOOD, FL 34223 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: ANNE L. MERRILL

04/27/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BRAIN, DAVID  
Address: PO BOX 2097  
City-St-Zip: ENGLEWOOD, FL 34295 US

Title: MGRM  
Name: MERRILL, ANNE L  
Address: P.O. BOX 2097  
City-St-Zip: ENGLEWOOD, FL 34295 US

Title: MGRM  
Name: MOORE, JOHN D  
Address: PO BOX 2097  
City-St-Zip: ENGLEWOOD, FL 34295 US

Title: MGRM  
Name: RONAY, OLGA  
Address: PO BOX 2097  
City-St-Zip: ENGLEWOOD, FL 34295 US

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

I hereby 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

MGRM

04/27/2012

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