2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000000109

Apr 04, 2012 Secretary of State

Entity Name: COVINGTON PARK OF HILLSBOROUGH HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business:

10012 N. DALE MABRY HWY

9887 FOURTH STREET NORTH #301

SUITE 102 TAMPA, FL 33618 ST. PETERSBURG, FL 33702

Current Mailing Address:

New Mailing Address:

10012 N. DALE MABRY HWY SUITE 102

9887 FOURTH STREET NORTH #301

ST. PETERSBURG, FL 33702

TAMPA, FL 33618

FEI Number: 59-3659108

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

RAMPART PROPERTIES, INC 9887 4TH STREET NORTH #301 ST PETERSBURG, FL 33702

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

FEI Number Applied For ()

Date

OFFICERS AND DIRECTORS:

WATTS, DOUG Name:

Address: 9887 FOURTH STREET NORTH #301 City-St-Zip: ST PETERSBURG, FL 33702

Title: PD

Name: BROST, ANTHONY

Address: 9887 FOURTH STREET NORTH #301 City-St-Zip: ST PETERSBURG, FL 33702

Title:

JEFFRIES, GREG Name:

Address: 9887 FOURTH STREET NORTH #301 City-St-Zip: ST PETERSBURG, FL 33702

Title: SD

Name: ELWELL, KEVIN

9887 FOURTH STREET NORTH #301 Address: City-St-Zip: ST PETERSBURG, FL 33702

VPD Title:

Name: MCCARTHY, ROBERT 9887 FOURTH STREET NORTH Address: City-St-Zip: ST PETERSBURG, FL 33702

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: TONY BROST PD 04/04/2012