

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 06, 2007
Secretary of State**

DOCUMENT# N00000001290

Entity Name: PARADISE COVE HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

10417 PARADISE BAY COURT
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:

10417 PARADISE BAY COURT
CLERMONT, FL 34711

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, CORNELIOUS
10417 PARADISE BAY COURT
CLERMONT, FL 34711 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MILLER, CORNELIOUS
Address: 10417 PARADISE BAY COURT
City-St-Zip: CLERMONT, FL 34711

Title: VD () Delete
Name: TANNER, JESSICA
Address: 10435 PARADISE BAY COURT
City-St-Zip: CLERMONT, FL 34711

Title: SD () Delete
Name: PUSKAS, MICHELLE
Address: 10412 PARADISE BAY COURT
City-St-Zip: CLERMONT, FL 34711

Title: TD () Delete
Name: PUSKAS, MICHELLE
Address: 10412 PARADISE BAY COURT
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: COMTON, CHRISTOPHER
Address: 10423 PARADISE BAY COURT
City-St-Zip: CLERMONT, FL 34711

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

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 Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MICHELLE PUSKAS

TD

03/06/2007

Electronic Signature of Signing Officer or Director

Date