

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001309

FILED  
Apr 19, 2012  
Secretary of State

**Entity Name:** THE PRESERVE OF VERO HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

5TH STREET SW  
VERO BEACH, FL 32962

**New Principal Place of Business:**

**Current Mailing Address:**

4235 5TH STREET  
VERO BEACH, FL 32968

**New Mailing Address:**

FEI Number: 65-1089594      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

COBURN & COMPANY  
4235 5TH STREET  
VERO BEACH, FL 32968      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: D  
Name: HICKEY, ROBIN  
Address: 2425 3RD PLACE SW  
City-St-Zip: VERO BEACH, FL 32962

Title: D  
Name: WALLACE, SCOTT  
Address: 2200 3RD LN SW  
City-St-Zip: VERO BEACH, FL 32962

Title: T  
Name: DICKER, BILL  
Address: 355 21ST COURT SW  
City-St-Zip: VERO BEACH, FL 32962

Title: S  
Name: NEUFELD, JAN  
Address: 2170 3RD PL SW  
City-St-Zip: VERO BEACH, FL 32962

Title: P  
Name: TURBITT, JACK (JOHN)  
Address: 2195 3RD LANE SW  
City-St-Zip: VERO BEACH, FL 32962

Title: VP  
Name: AMMIRATO, TOM  
Address: 2450 4TH LANE SW  
City-St-Zip: VERO BEACH, FL 32962

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: DEBRA COBURN

RA

04/19/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date