2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02843

Apr 04, 2005 Secretary of State

Entity Name: COVE CAY COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 3500 COVE CAY DRIVE CLEARWATER, FL 33760 **Current Mailing Address: New Mailing Address:** 3500 COVE CAY DRIVE CLEARWATER, FL 33760 US FEI Number: 59-2512284 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COVE CAY COMMUNITY ASSOC., INC. 3500 COVE CAY DRIVE CLEARWATER, FL 33760 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition PENZIK, RONALD Name: Name: 2617 COVE CAR DR., #607 Address: Address: City-St-Zip: CLEARWATER, FL 33760 City-St-Zip: Title: VD Title: VD (X) Change () Addition () Delete SOBEL, HARRY Name: CAHILL, ELEANOR Name: Address: 3400 COVE CAR DR., #61 Address: 2620COVE CAR DR., #607 City-St-Zip: CLEARWATER, FL 33760 City-St-Zip: CLEARWATER, FL 33760 Title: () Delete Title: () Change () Addition HAUER, YOLANDA Name: Name: 3300 COVE CAY DR, #5-F Address: Address: City-St-Zip: CLEARWATER, FL City-St-Zip: Title: () Delete Title: () Change () Addition Name: DAVIS, RALPH Name: 800 COVE CAY DRIVE #1C Address: Address: City-St-Zip: CLEARWATER, FL City-St-Zip: Title: () Delete Title: (X) Change () Addition CAHILL, ELEANOR BEAUSOLEIL, ROLAND Name: Name: 2629 COVE CAY DR., 607 2700 COVE CAY DRIVE #3A Address: Address: City-St-Zip: CLEARWATER, FL 33760 City-St-Zip: CLEARWATER, FL 33760

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 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: GERALD T. PANAGROSSI MGR 04/04/2005