

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002553

FILED  
Apr 10, 2012  
Secretary of State

**Entity Name:** TROPICAL COVE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

11691 GATEWAY BOULEVARD  
SUITE 203  
FORT MYERS, FL 33913

**New Principal Place of Business:**

**Current Mailing Address:**

11691 GATEWAY BOULEVARD  
SUITE 203  
FORT MYERS, FL 33913

**New Mailing Address:**

FEI Number: 20-2233700

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VISION MANAGEMENT  
11691 GATEWAY BOULEVARD  
SUITE 203  
FORT MYERS, FL 33913 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  
Name: KERTIS, JOHN  
Address: 11691 GATEWAY BLVD SUITE 203  
City-St-Zip: FORT MYERS, FL 33913

Title: TSD  
Name: PETTINATO, RICHARD  
Address: 8862 TROPICAL CT.  
City-St-Zip: FORT MYERS, FL 33908

Title: VPD  
Name: ZELDON, EVAN  
Address: 11691 GATEWAY BLVD SUITE 203  
City-St-Zip: FORT MYERS, FL 33913

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: WILLIAM DONATHAN

CFO

04/10/2012

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

\_\_\_\_\_ Date