

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 08, 2006 8:00 am
Secretary of State

05-08-2006 90293 024 ****61.25

DOCUMENT # N10021 1. Entity Name PIRATES COVE INLET MASTER HOMEOWNERS' ASSOCIATION, INC.	
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Principal Place of Business 300 CAIN RD. PANAMA CITY BCH. FL 32413 US	Mailing Address 300 CAIN RD. PANAMA CITY BEACH FL 32413
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2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country	3. Mailing Address Suite, Apt. #, etc. City & State Zip Country
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1st MOORE CR2E037 (10/05)

4. FEI Number 59-2884891	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GRECO, HUGH 300 CAIN RD PANAMA CITY BCH. FL 32413	
7. Name and Address of New Registered Agent Name MIKE FARRELL Street Address (P.O. Box Number is Not Acceptable) 303 CAIN Rd City PANAMA CITY BCH. FL Zip Code 32413	

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **MIKE FARRELL**

Signature, typed or printed name of registered agent and title if applicable

Mike Farrell

(NOTE: Registered Agent signature required when re-registering)

4/26/06

DATE

FILE NOW: FEE IS \$61.25 Due By May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GRECO, HUGH 304 CAIN RD PANAMA CITY BCH. FL 32413 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FARRELL, MIKE 303 CAIN RD PANAMA CITY BEACH FL 32413 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MIKE FARRELL 303 CAIN Rd PANAMA CITY BCH. FL. 32413 ☒ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD JONES, CONNIE 705 GULFVIEW DRIVE PANAMA CITY BEACH FL 32413 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BOWEN, TOBBIE 302 CAIN RD PANAMA CITY BEACH FL 32413 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOWDEN, RODGER 152 CAIN ROAD PANAMA CITY BEACH FL 32413 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Sharon Brown

4/28/06 95-335-0123