ANNUAL REPORT DOCUMENT # N20340

2004 NOT-FOR-PROFIT CORPORATION



FILED Apr 21, 2004 8:00 am Secretary of State 04-21-2004 90099 008 ****61.25

1. Entity Nam FINN'S C	OVE HOMEOWNERS ASSO	CIATION, INC.		~	21-2004 9	0099 008	.1.23	
C/O PENN FIRST MANAGEMENT, INC. C/O PENN 1813 N. DEAN RD 1813 N. I		1813 N. DEAN RD	ENN FIRST MANAGEMENT, INC. N. DEAN RD					
2. Principal Place of Business 3. Mailing		3. Mailing Address	ng Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		g-NP	CR2E037 (10/03)		
City & State		City & State	City & State		4. FEI Number Applied For 59-2912229 Not Applicab			
Zip Country Zip		Zip	Country		5. Certificate of Status Desired S8.75 Additional Fee Required			
PENN FIRST MANAGEMENT, INC. 1813 N. DEAN RD ORLANDO, FL 32817 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.							de	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required whe					Ma	DATE	to	
	Due by May 1, 2004	Trust Fund Cor	atribution.	\$5.00 May Be Added to Fees	Florid	a Department of S	State	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PARZYCH, MAIDEEN 756 RIVERBOAT CIRCLE ORLANDO, FL 32828	CTORS Delete	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONS/CHANGE	S TO OFFICERS	S AND DIRECTORS II	Addition	
TITLE- NAME STREET ADDRESS CITY-ST-ZIP	SD NICHOLS, PAT 784 RIVERBOAT CIRCLE ORLANDO, FL 32828	☐ Delete	NAME STREET ADDRESS CITY-SI-ZIP	·		☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KRASINSKI, DANIEL 724 RIVERBOAT CIRCLE ORLANDO, FL 32828	② Detete	NAME STREET ADDRESS CITY-ST-ZIP	-		Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD VARGAS, TONY 768 RIVERBOAT CIRCLE ORLANDO, FL 32828	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROVBERTS, SHELA 744 RIVERBOAT CIRCLE ORLANDO, FL 32828	☑ 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 of indicated of the cor	certify that the information supplied with the on this report or supplemental report is to poration or the receiver or trustee empower, or on an attachment with the address.	nis filing does not qualify for th rue and accurate and that my	e exemption stated in Se signature shall have the	ection 119.07(3)(i), Flor same legal effect as if	ida Statutes. I fi	urther certify that the	information	

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Member

John Bensey

12604 Spicewood Ct.

Orlando, Fl. 32828

Annual 4th Monday (October)

Address
126/8 Country Meadow Ct. Orlando, Fl. 32828

882 Brookmeadow Ct. Orlando, Fl. 32828

Vice President

Frank Nardi

President

Name Mindy Tomko

Secretary

Pat Nichols

Treasurer

Dan Krasinski

724 Riverboat Circle

Orlando, Fl. 32828

Orlando, Fl. 32828

764 Riverboat Circle

Finns Cove Board of Directors - Alachmens

#N20340