## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N20340

**FILED** Feb 20, 2012 Secretary of State

Entity Name: FINN'S COVE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

WATERFOD LAKES 1320 N. SEMORAN BLVD ORLANDO,, FL 32809 US

SUITE 100

ORLANDO,, FL 32807

**Current Mailing Address: New Mailing Address:** 

498 PALM SPRINGS DR PO BOX 781327

SUITE 235 ORLANDO, FL 32878 US

ALTAMONTE SPRINGS, FL 32701 US

FEI Number: 59-2912229 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:

BOYLE, JAMES W TOWERS PROPERTY MANAGEMENT, INC. 498 PALM SPRINGS DR., #235 1320 N. SEMORAN BLVD

ALTAMONTE SPRINGS, FL 32701 US SUITE 100 ORLANDO, FL 32807 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: BENJAMIN ISIP 02/20/2012

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

NARDI, FRANK Name:

Address: 882 BROOKMEADOW CT City-St-Zip: ORLANDO, FL 32828

Title: PD

Name: TOMKO, MINDY

Address: 12618 COUNTRY MEADOW CT

City-St-Zip: ORLANDO, FL

Title: VD

FLYNN, DARYL Name: Address: 736 RIVER BOAT CR City-St-Zip: ORLANDO, FL

Title:

Name: STONE, BARBARA 732 RIVERBOAT CR Address: City-St-Zip: ORLANDO, FL 32828

Title:

KRASINSKI, DANIEL Name: 724 RIVERBOAT CR Address: City-St-Zip: ORLANDO, FL 32828

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: MINDY TOMKO PD 02/20/2012