


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2007 8:00 am
Secretary of State

04-16-2007 90034 040 ****61.25

DOCUMENT # N35287
 1. Entity Name
PALM COVE PROPERTY OWNERS ASSOCIATION, INC.



Principal Place of Business
 2115 SE OCEAN BLVD
 STUART, FL 34996 US

Mailing Address
 2115 SE OCEAN BLVD
 STUART, FL 34996 US

2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

40060535



02052007 Chg-NP CR2E037 (12/06)

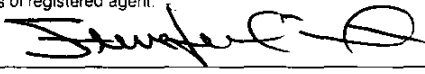
4. FEI Number
 65-0161146 Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
MALONE, JOSEPH D
 6085 FOUNTAIN PALM DR
 JUPITER, FL 33458

7. Name and Address of New Registered Agent
 Name **STEVE LEIBOVICH**
 Street Address (P.O. Box Number is Not Acceptable)
18585 LAKESIDE GARDENS DR.
 City **JUPITER** FL Zip Code **33458**

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  **STEVE LEIBOVICH, PRESIDENT** 3/21/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

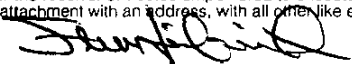
Filing Fee is \$61.25 Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees*

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HOWARD, STEPHEN 18621 LAKESIDE GARDENS DRIVE JUPITER, FL 33458 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LEIBOVICH, STEVEN 18585 LAKESIDE GARDENS DRIVE JUPITER, FL 33458 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD TIBURZI, ALLAN 18549 LAKESIDE GARDENS DR JUPITER, FL 33458 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MALONE, JOSEPH 6085 FOUNTAIN PALM DR JUPITER, FL 33458 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition FRED LOCKE 6041 FOUNTAIN PALM DR JUPITER FL 33458
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRAGG, ROBERT 6072 FOUNTAIN PALM DR JUPITER, FL 33458 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition DIR DAVID DREYER 18610 LAKESIDE GARDENS DR. JUPITER FL 33458
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILCOX, ANNE K 18633 LAKESIDE GARDEN DR JUPITER, FL 33458 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition TREASURER ALLAN TIBURZI 18549 LAKESIDE GARDENS DR. JUPITER FL 33458

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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:  **STEVE LEIBOVICH, PRES** 3/21/07 561-743-7200
Signature and typed or printed name of signing officer or director Date Daytime Phone #