


**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jul 17, 2003 8:00 am
Secretary of State

07-17-2003 90036 047 ****61.25

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DOCUMENT # N37774
1. Entity Name
QUEEN'S COVE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
**3730 IMPERIAL DRIVE
WINTER HAVEN FL 33880
US**

Mailing Address
**3542 MAJESTY LOOP
WINTER HAVEN FL 33880
US**

2. Principal Place of Business
3542 Majesty Loop
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
Winter Haven, FL

City & State

Zip
33880 Country
USA

Zip Country

4. FEI Number **59-3110178** Applied For
Not Applicable

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



CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent
**PIVER, WANDA
3743 IMPERIAL DRIVE
WINTER HAVEN FL 33880**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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 Wanda Piver Wanda Piver, Treasurer 7/14/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25
After September 10, 2003, min will be \$236.25

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

TITLE	P	<input type="checkbox"/> Delete
NAME	BARRIOS, SHERRI	
STREET ADDRESS	3730 IMPERIAL DR.	
CITY-ST-ZIP	WINTER HAVEN FL 33880	
TITLE	VP	<input type="checkbox"/> Delete
NAME	SMUTAK, BILL	
STREET ADDRESS	3708 IMPERIAL DRIVE	
CITY-ST-ZIP	WINTER HAVEN FL 33880	
TITLE	S	<input type="checkbox"/> Delete
NAME	PIVER, WANDA	
STREET ADDRESS	3743 IMPERIAL DR	
CITY-ST-ZIP	WINTER HAVEN FL 33880	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MURRAY, JOLEE	
STREET ADDRESS	3501 MAJESTY LOOP	
CITY-ST-ZIP	WINTER HAVEN FL 33880	
TITLE	D	<input type="checkbox"/> Delete
NAME	TRINIDAD, ANGEL	
STREET ADDRESS	3719 IMPERIAL DR	
CITY-ST-ZIP	WINTER HAVEN FL 33880	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	RAMKHALAWAN, ALVIN	
STREET ADDRESS	3727 IMPERIAL DRIVE	
CITY-ST-ZIP	WINTER HAVEN FL 33880	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Treasurer	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: Wanda Piver Wanda Piver 7/14/03 (863) 297-5463

CR2E037 (4/03)